Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF WISCONSIN	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Andy First name L. Middle name Kirkpatrick Last name and Suffix (Sr., Jr., II, III)	_	Alissa First name J. Middle name Kirkpatrick Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4916		xxx-xx-0938

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	1261 Marian Lane	If Debtor 2 lives at a different address:
		Green Bay, WI 54304 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Brown County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

	tor 1 tor 2	Andy L. Kirkpatric Alissa J. Kirkpatri			Case numb	DET (if known)
_		- II				
Pari		Tell the Court About			- D	2040/b) for ladiciduals Filips for Donlywater
7.	Bank	chapter of the cruptcy Code you are		brief description of each, see <i>Notic</i> b, go to the top of page 1 and check		342(b) for Individuals Filing for Bankruptcy
	choo	sing to file under	☐ Chapter 7			
			☐ Chapter 11			
			☐ Chapter 12			
			Chapter 13			
8.	How	you will pay the fee	about how y order. If you a pre-printe	ou may pay. Typically, if you are pa rr attorney is submitting your payme d address.	ying the fee yourself, you nt on your behalf, your atto	lerk's office in your local court for more details may pay with cash, cashier's check, or money orney may pay with a credit card or check with a attach the Application for Individuals to Pay
			The Filing F ☐ I request the but is not retained applies	Fee in Installments (Official Form 10: nat my fee be waived (You may required to, waive your fee, and may to your family size and you are una	3A). Juest this option only if you do so only if your income i ble to pay the fee in install	are filing for Chapter 7. By law, a judge may, s less than 150% of the official poverty line ments). If you choose this option, you must fill n 103B) and file it with your petition.
9. Have you filed for No.						
	bankruptcy within the last 8 years?	☐ Yes.				
			Distric	t Wh	nen	Case number
			Distric	t Wr	nen	Case number
			Distric	t Wh	nen	Case number
10.	case filed not fi you,	iny bankruptcy s pending or being by a spouse who is illing this case with or by a business er, or by an ate?	■ No □ Yes.			
			Debto			Relationship to you
			Distric	t Wh	nen	Case number, if known
			Debto			Relationship to you
			Distric	t Wh	nen	Case number, if known
11.		ou rent your	■ No. Go to	line 12.		
	rooiu		☐ Yes. Has y	our landlord obtained an eviction ju-	dgment against you and d	o you want to stay in your residence?
				No. Go to line 12.		
				Yes. Fill out <i>Initial Statement Abo</i> bankruptcy petition.	ut an Eviction Judgment A	Against You (Form 101A) and file it with this

	tor 1 Andy L. Kirkpatric				Case number (if known)			
Par	Report About Any Bu	sinesses	You Owi	n as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Nam	Name and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Nam	e of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Num	ber, Street, City, Sta	te & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	е			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines	s. If you ins, cash-	ndicate that you are low statement, and	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	I am	not filing under Cha	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	Report if You Own or	Have Any	/ Hazard	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat	☐ Yes.						
	of imminent and identifiable hazard to public health or safety?		What is	the hazard?				
	Or do you own any property that needs immediate attention?			diate attention is , why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where	is the property?	Number, Street, City, State & Zip Code			
					Number, Street, Oity, State & Zip Sode			

Debtor 1 Debtor 2

Andy L. Kirkpatrick Alissa J. Kirkpatrick

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing abou
credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate

in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a	briefing	about	credit
counseling because of:			

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 2 Andy L. Kirkpatric tor 2 Alissa J. Kirkpatri				Case number (if known)		
Part	6: Answer These Questi	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consindividual primarily for a person			ned in 11 U.S.C. § 101(8) as "incurred by ar	
			☐ No. Go to line 16b.				
			■ Yes. Go to line 17.				
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe	e that are not consu	imer debts or busines	s debts	
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7.	Go to line 18.			
	Do you estimate that after any exempt property is excluded and	☐ Yes.	expenses are paid that funds w			erty is excluded and administrative creditors?	
i I	administrative expenses are paid that funds will		□ No				
	be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000)	2 5,001-50,000	
		□ 50-99	1	5001-10,00		☐ 50,001-100,000	
		☐ 100-1 ☐ 200-9		□ 10,001-25,0	000	☐ More than100,000	
19.	How much do you estimate your assets to	\$0 - \$	*	□ \$1,000,001 □ \$10,000,00		□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion	
	be worth?	□ \$50,001 - \$100,000 ■ \$100,001 - \$500,000			1 - \$50 million 1 - \$100 million	☐ \$1,000,000,001 - \$10 billion	
			001 - \$1 million		01 - \$500 million	☐ More than \$50 billion	
20.	How much do you estimate your liabilities	□ \$0 - \$,	□ \$1,000,001 □ \$10,000,000		□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion	
	to be?		001 - \$100,000 001 - \$500,000	□ \$10,000,00 □ \$50,000,00	1 - \$50 million 1 - \$100 million	□ \$10,000,000,001 - \$10 billion	
			001 - \$1 million		01 - \$500 million	☐ More than \$50 billion	
Part	7: Sign Below						
For	you	I have ex	camined this petition, and I declar	re under penalty of	perjury that the inforn	nation provided is true and correct.	
						under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.	
			rney represents me and I did not nt, I have obtained and read the r			t an attorney to help me fill out this	
		I request	relief in accordance with the cha	apter of title 11, Uni	ted States Code, spe	cified in this petition.	
		bankrupt 1519, an	cy case can result in fines up to 3 d 3571.			or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341,	
			y L. Kirkpatrick		/s/ Alissa J. Kirk		
			. Kirkpatrick e of Debtor 1		Alissa J. Kirkpat Signature of Debtor		
		Executed	d on February 1, 2016 MM / DD / YYYY		Executed on Feb	ruary 1, 2016 / DD / YYYY	

Debtor 1 Andy L. Kirkpatri Debtor 2 Alissa J. Kirkpatr		Cas	Case number (if known)		
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unit	ted States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter		
If you are not represented by an attorney, you do not need to file this page.	for which the person is eligible. I also certify 342(b) and, in a case in which § 707(b)(4)(D) in the schedules filed with the petition is inco	applies, certify that I have r	no knowledge after an inquiry that the information		
	/s/ Michael P. Schoenbohm	Date	February 1, 2016		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Michael P. Schoenbohm				
	Schoenbohm Law, S.C. Firm name				
	516 E. Wisconsin Avenue Appleton, WI 54911				
	Number, Street, City, State & ZIP Code				
	Contact phone 920-735-5858	Email address	cmh@schoenbohmlaw.com		
	1016877				
	Bar number & State				

Certificate Number: 13858-WIE-CC-026664196



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>December 13, 2015</u>, at <u>12:35</u> o'clock <u>PM CST</u>, <u>Alissa Kirkpatrick</u> received from <u>MoneySharp Credit Counseling Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Eastern District of Wisconsin</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date:	December 13, 2015	By:	/s/Marisol Sanchez
		Name:	Marisol Sanchez
		Title:	Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 13858-WIE-CC-026664195



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>December 13, 2015</u>, at <u>12:35</u> o'clock <u>PM CST</u>, <u>Andy Kirkpatrick</u> received from <u>MoneySharp Credit Counseling Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Eastern District of Wisconsin</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date:	December 13, 2015	By:	/s/Marisol Sanchez
*		Name:	Marisol Sanchez
		Title:	Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity:

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts. subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

filing fee \$1,167

administrative fee \$550 \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations.

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations.

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Best Case Bankruptcy

Fill	in this information to identify your case:					
Deb	tor 1 Andy L. Kirkpatrick					
Deh	First Name Middle tor 2 Alissa J. Kirkpatrick	e Name	Last Name			
1		e Name	Last Name			
Unit	ed States Bankruptcy Court for the: EASTERI	N DISTRICT OF WIS	CONSIN			
Cas	e number wn)				Check	t if this is an
					amen	ded filing
	icial Form 106Sum					
Su	mmary of Your Assets and Lial	bilities and C	ertain Statistical Information	on	-	12/15
infor	s complete and accurate as possible. If two m mation. Fill out all of your schedules first; the original forms, you must fill out a new Summ	en complete the info	rmation on this form. If you are filing a			
Part	1: Summarize Your Assets					
					Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B 1a. Copy line 55, Total real estate, from Schedu) ıle A/B			\$	115,000.00
	1b. Copy line 62, Total personal property, from	Schedule A/B			\$	114,670.00
	1c. Copy line 63, Total of all property on Schedu	ule A/B			\$	229,670.00
Part	2: Summarize Your Liabilities					
						abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secur 2a. Copy the total you listed in Column A, Amou			э <i>D</i>	\$	118,786.00
3.	Schedule E/F: Creditors Who Have Unsecured 3a. Copy the total claims from Part 1 (priority u				\$	0.00
	3b. Copy the total claims from Part 2 (nonpriori	ty unsecured claims)	from line 6j of Schedule E/F		\$	68,100.00
			·	_		,
			Your total liabil	ities \$		186,886.00
	<u></u>					
Part	3: Summarize Your Income and Expenses					
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line	12 of Schedule I			\$	5,122.22
5.	Schedule J: Your Expenses (Official Form 106J Copy your monthly expenses from line 22c of S) chedule J			\$	3,874.00
Part	4: Answer These Questions for Administra	tive and Statistical	Records			
6.	Are you filing for bankruptcy under Chapters ☐ No. You have nothing to report on this part		his box and submit this form to the court w	vith your	other sc	chedules.
7.	■ Yes What kind of debt do you have?					
	·	0.000	(b	h . f		family.
	Your debts are primarily consumer debt household purpose," 11 U.S.C. § 101(8). F			ly for a p	ersonal	, татиу, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Filed 02/01/16

page 1 of 2

Best Case Bankruptcy

the court with your other schedules.

Debtor 1	Andy L. Kirkpatrick
Debtor 2	Alissa J. Kirkpatrick

Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

8,302.71

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Best Case Bankruptcy

		his filing:		
Debtor 1	Andy L. Kirkpatrick First Name Middle	e Name Last Name		
Debtor 2	Alissa J. Kirkpatrick			
(Spouse, if filing)		e Name Last Name		
United States Ba	nkruptcy Court for the: EASTERN	DISTRICT OF WISCONSIN		
Case number _				☐ Check if this is ar amended filing
Official Fo	rm 106A/B			
Schedul	e A/B: Property			12/15
t fits best. Be as c nore space is need	omplete and accurate as possible. If tw led, attach a separate sheet to this forn	on asset only once. If an asset fits in more than one of married people are filing together, both are equally non the top of any additional pages, write your name and pages.	y responsible for supplying	correct information. If
Part 1: Describe	Each Residence, Building, Land, or Oth	ner Real Estate You Own or Have an Interest In		
Yes. Where is	s the property:			
1.1 1261 Mari		What is the property? Check all that apply ■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home	amount of any secured cl Creditors Who Have Clair	aims on Schedule D: ms Secured by Property.
1.1 1261 Mari	an Lane if available, or other description	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative	amount of any secured cl	aims on Schedule D:
1.1 1261 Mari. Street address,	an Lane if available, or other description	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property	amount of any secured cl Creditors Who Have Clair	aims on Schedule D: ms Secured by Property. Current value of the portion you own?
1.1 1261 Maria Street address, Green Bay	an Lane if available, or other description www.y	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	amount of any secured of Creditors Who Have Clair Current value of the entire property? \$115,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	cour ownership interest ancy by the entireties, or
1.1 1261 Maria Street address, Green Bay	an Lane if available, or other description www.y	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	current value of the entire property? \$115,000.00 Describe the nature of y (such as fee simple, ten	cour ownership interest ancy by the entireties, or
1.1 1261 Maria Street address, Green Bay City	an Lane if available, or other description www.y	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	amount of any secured cl Creditors Who Have Clair Current value of the entire property? \$115,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known. Survivorship Marit Check if this is con (see instructions)	current value of the portion you own? \$115,000.00 cour ownership interest ancy by the entireties, or
1.1 1261 Maria Street address, Green Bay City Brown	an Lane if available, or other description www.y	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item	amount of any secured cl Creditors Who Have Clair Current value of the entire property? \$115,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known. Survivorship Marit Check if this is con (see instructions)	Current value of the portion you own? \$115,000.00 Your ownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Schedule A/B: Property Official Form 106A/B page 1

Debto Debto		ndy L. Kirkpatrick lissa J. Kirkpatrick		Case number (if known)	
3. Ca	No Yes				
	No				
3.1	Make:	Chevrolet	Who has an interest in the property? Check one		
	Model:	Tahoe	☐ Debtor 1 only		
	Year:		Debtor 2 only	Current value of the	Current value of the
	Approxin	nate mileage: 104,219	■ Debtor 1 and Debtor 2 only		
			☐ At least one of the debtors and another		
				\$10,600.0	910,600.00
3.2	Make:	Chevrolet	Who has an interest in the property? Check one	Do not deduct secure	d claims or exemptions. Put
5.2			_		
	Approxin	E0 E00	_		
			_		
	Green	Bay WI 54304	,, ,	\$12,200.0	0 \$12,200.00
5 Ac .pa	ld the doges you	have attached for Part 2. Write be Your Personal and Household Ite	that number here		\$22,800.00 Current value of the portion you own?
					Do not deduct secured claims or exemptions.
	No		s, china, kitchenware		
	res. De	:5UIDE			
	Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No Yes				
					\$800.00
Ex	<i>ramples:</i> No	Televisions and radios; audio, vid including cell phones, cameras, r		nters, scanners; music col	lections; electronic devices

Official Form 106A/B Schedule A/B: Property page 2

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Debtor Debtor		Kirkpatrick Kirkpatrick	Case number (if known)	
Exa	other colle	and figurines; paintings, prints, or other artwork; books, ections, memorabilia, collectibles	pictures, or other art objects; stamp, coin, or baseball card colle	ections;
9. Equ i	ipment for sport amples: Sports, pl	ts and hobbies	cles, pool tables, golf clubs, skis; canoes and kayaks; carpentry	/ tools;
□ N ■ Y	No Yes. Describe			
		Decoys Location: 1261 Marian Lane, Green Bay V	/I 54304	3150.00
	<i>xamples:</i> Pistols, ı	rifles, shotguns, ammunition, and related equipment		
		Shotgun Location: 1261 Marian Lane, Green Bay V	// 54304	250.00
	xamples: Everyda	y clothes, furs, leather coats, designer wear, shoes, ac	cessories	
		Wearing apparel Location: 1261 Marian Lane, Green Bay V	// 54304 \$	500.00
	xamples: Everyda	y jewelry, costume jewelry, engagement rings, wedding	rings, heirloom jewelry, watches, gems, gold, silver	
		Wedding rings and misc. jewelry Location: 1261 Marian Lane, Green Bay V	/I 54304 \$1,	,500.00
Ex	on-farm animals examples: Dogs, ca No Yes. Describe			
		Dog		\$50.00
	•	I and household items you did not already list, inclu	ding any health aids you did not list	
		Lawn mower and snow blower Location: 1261 Marian Lane, Green Bay V	// 54304	3125.00
		Patio furniture and picnic table Location: 1261 Marian Lane, Green Bay V	/I 54304 \$	S200.00

Official Form 106A/B Schedule A/B: Property page 3

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	ebtor 1 ebtor 2		Kirkpa J. Kirkp		(Case number (if known)	
15						n Part 3, including any entries for		\$4,855.00
			r Financial					
Do) you ow	n or hav	e any lega	al or e	quitable interest	t in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No				•	r home, in a safe deposit box, and or	n hand when you file your petitic	on
17.			king, savi			accounts; certificates of deposit; shar unts with the same institution, list each		nouses, and other similar
						Institution name:		
				17.1.	Checking	Fox Communities Cre	edit Union	\$829.00
				17.2.	Savings	Fox Communities Cre	edit Union	\$1,505.00
	Examp ■ No □ Yes Non-pu	ples: Bond	I funds, in	· vestme	Institution or issu	brokerage firms, money market acc		in an LLC, partnership,
	■ No				about them ne of entity:		% of ownership:	
20.	Negotia	able instr	<i>ument</i> s ind	clude p	personal checks, o	egotiable and non-negotiable instr cashiers' checks, promissory notes, transfer to someone by signing or d	and money orders.	
	☐ Yes. (Give spec	cific inform		about them uer name:			
21.	Examp ■ No	oles: Intere	ension acests in IRA	A, ERIS	SA, Keogh, 401(k	s), 403(b), thrift savings accounts, or	other pension or profit-sharing	plans
00	Ca a comit			,,	of account:	Institution name:		
<i>2</i> '2.	Your sl	hare of all		deposit	ts you have made	e so that you may continue service ont, public utilities (electric, gas, wate		ies, or others
	_					Institution name or individu	ual:	
23.	Annuiti No Yes				dic payment of mo	oney to you, either for life or for a nu	umber of years)	

Schedule A/B: Property Official Form 106A/B page 4

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Debtor 1 Debtor 2		Kirkpatrick Kirkpatrick	Case number (if known)	
		Edward Jones Roth IRA		\$22,030.00
		BMO Harris 401(k) from Wisconsin Plastics \$13,748.59 loan balance.	s, Inc. \$48,099.80 balance and	\$34,351.00
		Fidelity 401(k) from Midwest Dental		\$28,300.00
		cation IRA, in an account in a qualified ABLE prog (1), 529A(b), and 529(b)(1).	ram, or under a qualified state tuition p	ogram.
☐ Yes		Institution name and description. Separately file the	records of any interests.11 U.S.C. § 521(c):
25. Trusts ■ No	s, equitable o	or future interests in property (other than anything	listed in line 1), and rights or powers ex	tercisable for your benefit
	Give specifi	c information about them		
		s, trademarks, trade secrets, and other intellectual domain names, websites, proceeds from royalties an		
☐ Yes.	Give specifi	c information about them		
Examµ ■ No	<i>ples:</i> Building	es, and other general intangibles permits, exclusive licenses, cooperative association	holdings, liquor licenses, professional licen	ses
☐ Yes.	Give specifi	c information about them		
Money or	property ow	red to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax re f	funds owed	to you		
■ No □ Yes.	Give specific	c information about them, including whether you alread	dy filed the returns and the tax years	
■ No	<i>ples:</i> Past du	e or lump sum alimony, spousal support, child support	t, maintenance, divorce settlement, proper	ty settlement
	ples: Unpaid	meone owes you wages, disability insurance payments, disability benef s; unpaid loans you made to someone else	fits, sick pay, vacation pay, workers' comp	ensation, Social Security
	Give specifi	c information		
<i>Exam</i> µ □ No		disability, or life insurance; health savings account (H	SA); credit, homeowner's, or renter's insur	ance
■ Yes.	Name the in	surance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
		Primerica - 3 term policies	Debtor/Joint Debtor	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Debtor 1 Debtor 2	Andy L. Kirkpatrick Alissa J. Kirkpatrick	Case number (if known)	
If you somed	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are one has died. Give specific information	e currently entitled to red	ceive property because
33. Claims <i>Examp</i> ■ No	s against third parties, whether or not you have filed a lawsuit or made a demand poles: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	l for payment	
■ No	contingent and unliquidated claims of every nature, including counterclaims of to	the debtor and rights t	o set off claims
■ No	nancial assets you did not already list Give specific information		
for Pa	the dollar value of all of your entries from Part 4, including any entries for pages art 4. Write that number here		\$87,015.00
No. Go	own or have any legal or equitable interest in any business-related property? to Part 6. Go to line 38.		
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.		
■ No.	Go to Part 7. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above	related property?	
53. Do yo u <i>Exam</i> µ ■ No	Describe All Property You Own or Have an Interest in That You Did Not List Above a have other property of any kind you did not already list? bles: Season tickets, country club membership Give specific information		
54. Add t	the dollar value of all of your entries from Part 7. Write that number here		\$0.00

Official Form 106A/B Schedule A/B: Property page 6

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Andy L. Kirkpatrick Debtor 1 Debtor 2 Alissa J. Kirkpatrick Case number (if known) List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$115,000.00 56. Part 2: Total vehicles, line 5 \$22,800.00 57. Part 3: Total personal and household items, line 15 \$4,855.00 58. Part 4: Total financial assets, line 36 \$87,015.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$114,670.00 Copy personal property total \$114,670.00 62.

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$229,670.00

Best Case Bankruptcy

Official Form 106A/B Schedule A/B: Property page 7

Property Tax Record CITY OF GREEN BAY Brown County, Wisconsin Parcel Number: 1-2082

Information is as current as the postings of Friday, January 15, 2016 at 1:14:22 AM. Note: Documents received prior to this date may be on hold or pending entry into the land records system.

Return to Search Results

Print Tips

Property Information	on	Current Unofficial Valuation					
Parcel Number	1-2082	Class	Acres	Land	Improvements	Total	
Owner Name	ANDY L & ALISSA J KIRKPATRICK	A - RESIDENTIAL	0.154	16,400.00	87,500.00	103,900.00	
Property Address	1261 MARIAN LN	All Classes	0.154	16,400.00	87,500.00	103,900.00	
Municipality	CT - CITY OF GREEN BAY						
School District	2289 - GREEN BAY SCH DIST	Legal Acres	0.154				
Sanitary District	504 - G.B. METRO SEWER						
Special District(s)	None	Values are not off December.	icial un	til new tax b	oills are issued	in	
	Note: For a specific tax below.	year valua	ation, select tax	year from tax recor	ds available		
					gal Description, may for all land classifica		
Mailing Address In	formation	Reference Docume	nt		Available Maps	}	
ANDY L & ALISSA	J KIRKPATRICK	Document #: 23073	382		View GIS Map)	
1261 MARIAN LN							
GREEN BAY WI 5	4304-2337				Other Maps		
Tax Records Availa	able	Tax Legal Descripti	on				
Tax Year		6,727 SQ FT					
O 2014 (Tax I	3ill Number 1754650)	SOUTHLAWN SUB LOT 9 BLK 2					
2015 (Tax I	Bill Number 1828002)						
		Note: May not be a full legal description					
View	Tax Detail	View Comments/History					
H -	take a few moments to appear						

State Bar of Wisconsin Form 1 - 2003 .

2307382

CATHY WILLIQUETTE

decleenckirkpa

WARRANTY DEED

Document Number

*Type name below signatures.

Document Name

Document Number Document Number	BROWN COUNTY RECORDER
THIS DEED, made between MICHAEL D. DE CLEENE, A SINGLE	· 41
PERSON	RECORDED ON 04/09/2007 09:15:38AM
("Grantor," whether one or mor	(e), (47 637 2667 63.13.30m)
and ANDY L. KIRKPATRICK AND ALISSA J. KIRKPATRICK,	REC FEE: 11.00
HUSBAND AND WIFE AS SURVIVORSHIP MARITAL PROPERTY ("Grantee," whether one or more	TRANS FEE: 349.20
(Glance, who he of the	PAGES: 1
Grantor, for a valuable consideration, conveys to Grantee the follows	ing
described real estate, together with the rents, profits, fixtures and of	her
appurtenant interests, in BROWN County, State	of
Wisconsin ("Property") (if more space is needed, please attach addendum):	
LOT NINE (9), BLOCK TWO (2), ACCORDING TO THE	· •
RECORDED PLAT OF SOUTHLAWN SUBDIVISION, IN THE CITY	Y
OF GREEN BAY, WEST SIDE OF FOX RIVER, BROWN COUNTY	Recording Area
WISCONSIN.	Name and Return Address
	LIBERTY TITLE
·	107 N. BROADWAY
	GREEN BAY, WI 54303
•	12614
	1-2082
•	Parcel Identification Number (PIN)
	This IS homestead property.
	(is) (is not)
Dated 3/19/07	
Michael De Cleine (SEAL)	(SEAL)
* MICHAEL D. DE CLEENE *	
(SEAL)	(SEAL)
AUTHENTICATION	ACKNOWLEDGMENT
	· .
Signature(s) STA	TE OF WISCONSIN) ss.
1 4 4.1	BROWN COUNTY)
authenticated on Pers	onally came before me on
the a	above-named MICHAEL D. DE CLEENE
*	
fore	me known to be the person(s) who executed the going instrument and acknowledged the same.
(II IIOL,	
authorized by Wis. Stat. § 706.06) THIS INSTRUMENT DRAFTED BY:	
THIS INSTRUMENT DRAFTED BT.	1 moly F. Pelaula
ATTY. TIMOTHY F. POLACK	ary Public, State of Wisconsin
107 N. BROADWAY, GREEN BAY, WI 54363	Commission (s permanent) (expires:)
NOTE: THIS IS A STANDARD FORM, ANY MODIFICATIONS TO	THIS FORM SHOULD BE CLEARLY IDENTIFIED.

Liberry Title & Abstract, Inc 107 N Broadway Ste 1, Green Bay WI 54303-2727

Phone: (920) 435-7708

Fax: (920) 435-7307

Jennifer Chambertain

Produced with ZipForm™ by RE FormsNet, LLC 18025 Fifteen Mile Road, Clinton Township, Michigan 48035

www.zipform.com

Fill in this infor	mation to identify your	case:		
Debtor 1	Andy L. Kirkpatri	ck		
	First Name	Middle Name	Last Name	
Debtor 2	Alissa J. Kirkpatı	rick		
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	EASTERN DISTRICT C	OF WISCONSIN	
Case number _				☐ Check if this is ar amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part I:	identili	y the Property	Tou Claim as	⊏xempt	

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.	
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)	

- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Household goods Location: 1261 Marian Lane, Green	\$1,280.00		\$1,280.00	11 U.S.C. § 522(d)(3)
Bay WI 54304 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Decoys	\$150.00		\$150.00	11 U.S.C. § 522(d)(5)
Location: 1261 Marian Lane, Green Bay WI 54304 Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit	
Shotgun Location: 1261 Marian Lane, Green	\$250.00		\$250.00	11 U.S.C. § 522(d)(5)
Bay WI 54304 Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
Wearing apparel Location: 1261 Marian Lane, Green	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
Bay WI 54304 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Wedding rings and misc. jewelry Location: 1261 Marian Lane, Green	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(4)
Bay WI 54304 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

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description of the property and line on fuller A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemptio
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
rom Schedule A/R: 13.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(5)
ioni govedale /v.b. 1911			100% of fair market value, up to any applicable statutory limit	
	\$125.00		\$125.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
	\$200.00		\$200.00	11 U.S.C. § 522(d)(5)
WI 54304			100% of fair market value, up to any applicable statutory limit	
	\$829.00		\$829.00	11 U.S.C. § 522(d)(5)
rom Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	\$1,505.00		\$1,505.00	11 U.S.C. § 522(d)(5)
rom Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	\$22,030.00		\$22,030.00	11 U.S.C. § 522(d)(10)(E)
			100% of fair market value, up to any applicable statutory limit	
	\$34,351.00		\$34,351.00	11 U.S.C. § 522(d)(10)(E)
748.59 loan balance.			100% of fair market value, up to any applicable statutory limit	
	\$28,300.00		\$28,300.00	11 U.S.C. § 522(d)(10)(E)
			100% of fair market value, up to any applicable statutory limit	
	\$0.00			11 U.S.C. § 522(d)(7)
			100% of fair market value, up to any applicable statutory limit	
	from Schedule A/B: 13.1 In mower and snow blower ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 14.1 In furniture and picnic table ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 14.2 In furniture and picnic table ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 14.2 In furniture and picnic table ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 17.1 In furniture and picnic table ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 17.2 In furniture and picnic table ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 17.2 In furniture and picnic table ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 17.2 In furniture and picnic table ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 23.1 In furniture and picnic table ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 23.1 In furniture and picnic table ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 23.1 In furniture and picnic table ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 23.1	portion you own Copy the value from Schedule A/B: 13.1 \$50.00 In mower and snow blower ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 14.1 In furniture and picnic table ation: 1261 Marian Lane, Green WI 54304 from Schedule A/B: 14.2 Cking: Fox Communities Credit of from Schedule A/B: 17.1 Ings: Fox Communities Credit of from Schedule A/B: 17.1 Ings: Fox Communities Credit of from Schedule A/B: 17.2 Ings: Fox Communities Credit of from Schedule A/B: 23.1 In from Schedule A/B: 23.1 In from Schedule A/B: 23.1 In from Schedule A/B: 23.2 In from Schedule A/B: 23.3 In from Schedule A/B: 23.3	portion you own Copy the value from Schedule A/B: 13.1 S50.00	State A/B that lists this property Schedule A/B State from Sched

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Fill in this inform	nation to identify you	ur case:			
Debtor 1	Andy L. Kirkpat	rick Middle Name Last Name		-	
Debtor 2	Alissa J. Kirkpa	trick			
(Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Bar	nkruptcy Court for the	EASTERN DISTRICT OF WISCONSIN		_	
Case number					
(if known)				☐ Check	t if this is an
				_	ded filing
Official Form	<u> 106D</u>				
Schedule	D: Creditors	Who Have Claims Secure	ed by Propert	У	12/15
		f two married people are filing together, both are eq,			
known).	iuitionai Fage, iiii it out	, number the entries, and attach it to this form. On t	ne top of any additional p	ages, write your name a	na case namber (ii
1. Do any creditors h	nave claims secured by	your property?			
☐ No. Check	this box and submit t	his form to the court with your other schedules.	You have nothing else	to report on this form.	
Yes, Fill in	all of the information	below	_		
	Secured Claims	25.5			
		core there are accounted along list the areditor concretely	Column A	Column B	Column C
		nore than one secured claim, list the creditor separately particular claim, list the other creditors in Part 2. As muc		Value of collateral	Unsecured
as possible, list the o	claims in alphabetical ord	er according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Capital On	ne	Describe the property that secures the claim:	\$2,450.00	\$800.00	\$1,650.00
Creditor's Name		Couch (fully secured)		<u> </u>	
		Location: 1261 Marian Lane, Green			
PO Box 30	285	Bay WI 54304			
Salt Lake		As of the date you file, the claim is: Check all that apply.			
84130-028		Contingent			
Number, Street,	City, State & Zip Code	☐ Unliquidated			
Who owes the del	ht? Check one	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only		■ An agreement you made (such as mortgage or se	ocured		
Debtor 2 only		car loan)	cuieu		
■ Debtor 1 and Deb	btor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	e debtors and another	☐ Judgment lien from a lawsuit			
Check if this cla	im relates to a	Other (including a right to offset)			
community deb	ot				
Date debt was incu	rred 2011	Last 4 digits of account number 4443			
2.2 Communit	ty First Credit	Describe the property that secures the claim:	\$10,803.00	\$10,600.00	\$203.00
Creditor's Name		2005 Chevrolet Tahoe 104,219 miles			-
		Location: 1261 Marian Lane, Green			
		Bay WI 54304			
PO Box 14		As of the date you file, the claim is: Check all that apply.			
Appleton,	WI 54912-1487	Contingent			
Number, Street,	City, State & Zip Code	Unliquidated			
Who owes the del	ht? Charle and	Disputed			
_	DLE CHECK ONE.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		 An agreement you made (such as mortgage or second car loan) 	ecured		
■ Debtor 1 and Del	htor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit			
■ Check if this cla		☐ Other (including a right to offset)			
community deb		· · · · · · · · · · · · · · · · · · ·			

Official Form 106D

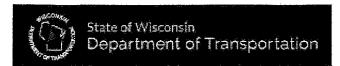
Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1 Andy L. Kirkpatrick		Case number (if know)		
Debtor 2 First Name Middle N Alissa J. Kirkpatrick First Name Middle N				
Date debt was incurred 12/31/13	Last 4 digits of account number 6159			
2.3 Community First Credit Union	Describe the property that secures the claim:	\$10,373.00	\$12,200.00 \$0	.00
Creditor's Name	2012 Chevrolet Impala 50,500 miles Location: 1261 Marian Lane, Green Bay WI 54304			
PO Box 1487 Appleton, WI 54912-1487	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed Nature of lies. Check all that apply			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secucar loan)	ıred		
■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
■ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 10/23/12	Last 4 digits of account number 6159			
Fox Communities Credit Union	Describe the property that secures the claim:	\$95,160.00	\$115,000.00 \$0	.00
Creditor's Name	1261 Marian Lane Green Bay, WI 54304 Brown County Appraised value as of 11/24/15			
3401 E. Calumet Street Appleton, WI 54915	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secucar loan)	ıred		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			-
Date debt was incurred 12/21/15	Last 4 digits of account number 1042			
Add the dollar value of your entries in Countries in Countries is the last page of your form, add	olumn A on this page. Write that number here: the dollar value totals from all pages.	\$118,786.00		
Write that number here:	com.	\$118,786.00		
to collect from you for a debt you owe to s	or a Debt That You Already Listed e notified about your bankruptcy for a debt that you all comeone else, list the creditor in Part 1, and then list the d in Part 1, list the additional creditors here. If you do re	he collection agency here. Sim	nilarly, if you have more than one	_
Name Address				
-NONE-		e in Part 1 did you enter	the creditor?	_
	Last 4 digits of	of account number		_

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Lien Holder Results





Lien Holder Results

VIN: 1GNEK13T05R119138

Year: 2005

Make: CHEVROLET

Electronic title delivered to the lien holder.

COMMUNITY FIRST CREDIT UNION

Lien Holder: COMMUNITY FIRST CREDIT UNION

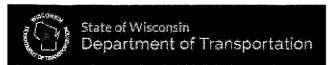
Address: PO BOX 1487

APPLETON WI 54912-1487

Date Listed: 12/31/2013

Exit Back

Version A - 32



Lien Holder Results

VIN: 2G1WC5E34C1167593

Year: 2012

Make: CHEVROLET

Paper title delivered to the lien holder.

COMMUNITY FIRST CREDIT UNION

Lien Holder: COMMUNITY FIRST CREDIT UNION

Address: PO BOX 1487

APPLETON WI 54912-1487

Date Listed: 10/23/2012

Exit Back

Version A - 32



First American Title Insurance Company -Evans Title Division 300 N Broadway, Ste. 3B Green Bay, WI 54303-2753 Phone: (920)435-5212 Fax: (877)244-1774

LETTER REPORT

PREPARED FOR: Schoenbohm Law, S.C.

Attn: Christine H 516 E. Wisconsin Avenue Appleton, WI 54911 Fax No.: (920)735-5840

Order No.: 2717362

We have searched the public records relative to the premises described in Section A and the following party(ies) is/are the grantee(s) on the last recorded conveyance of a full ownership interest:

Andy L. Kirkpatrick and Alissa J. Kirkpatrick, husband and wife as survivorship marital property

SECTION A

Legal description of subject property:

Lot Nine (9), Block Two (2), Plat of Southlawn Subdivision, in the City of Green Bay, West side of Fox River, Brown County, Wisconsin.

TAX ID.: 1-2082

PROPERTY ADDRESS: 1261 Marian Lane, Green Bay, WI 54304

SECTION B

REAL ESTATE TAXES AND UNRELEASED ENCUMBRANCES OF RECORD:

ASSESSMENT INFORMATION AS OF: January 19, 2016

Land: \$16,400.00

Improvements: \$87,500.00

Total: \$103,900.00

Fair Market Value: \$101,200.00

- 1. Taxes, general and special for the year 2016, not now due and payable.
- 2. Mortgage between Andy L. Kirkpatrick and Alissa J. Kirkpatrick, husband and wife as mortgagor, and Fox Communities Credit Union, as mortgagee, in the original stated principal amount of \$95,000.00, recorded December 28, 2015 in Document No. 2729770.

NOTE: This report does not include a search for easements and restrictions of record or matters not disclosed in the public records.

This Report does not represent a detailed examination of each instrument or an opinion as to the title to the above described premises. The chain of title has been searched only since the last apparent conveyance of a full ownership interest. Title has not been searched or examined prior to said conveyance.

IMPORTANT - READ CAREFULLY: THIS REPORT IS NOT AN INSURED PRODUCT OR SERVICE OR A REPRESENTATION OF THE CONDITION OF TITLE TO REAL PROPERTY. IT IS NOT AN ABSTRACT, LEGAL OPINION, OPINION OF TITLE, TITLE INSURANCE COMMITMENT OR PRELIMINARY REPORT, OR ANY FORM OF TITLE INSURANCE OR GUARANTY. THIS REPORT IS ISSUED EXCLUSIVELY FOR THE BENEFIT OF THE APPLICANT THEREFOR, AND MAY NOT BE USED OR RELIED UPON BY ANY OTHER PERSON. THIS REPORT MAY NOT BE REPRODUCED IN ANY MANNER WITHOUT FIRST AMERICAN'S PRIOR WRITTEN CONSENT. FIRST AMERICAN DOES NOT REPRESENT OR WARRANT THAT THE INFORMATION HEREIN IS COMPLETE OR FREE FROM ERROR, AND THE INFORMATION HEREIN IS PROVIDED WITHOUT ANY WARRANTIES OF ANY KIND, AS-IS, AND WITH ALL FAULTS. AS A MATERIAL PART OF THE CONSIDERATION GIVEN IN EXCHANGE FOR THE ISSUANCE OF THIS REPORT, RECIPIENT AGREES THAT FIRST AMERICAN'S SOLE LIABILITY FOR ANY LOSS OR DAMAGE CAUSED BY AN ERROR OR OMISSION DUE TO INACCURATE INFORMATION OR NEGLIGENCE IN PREPARING THIS REPORT SHALL BE LIMITED TO THE FEE CHARGED FOR THE REPORT. RECIPIENT ACCEPTS THIS REPORT WITH THIS LIMITATION AND AGREES THAT FIRST AMERICAN WOULD NOT HAVE ISSUED THIS REPORT BUT FOR THE LIMITATION OF LIABILITY DESCRIBED ABOVE. FIRST AMERICAN MAKES NO REPRESENTATION OR WARRANTY AS TO THE LEGALITY OR PROPRIETY OF RECIPIENT'S USE OF THE INFORMATION HEREIN.

Effective Date: January 14, 2016 at 7:00 a.m.

EVANS TITLE COMPANIES, a division of First American Title Insurance Company

Carol Soquet

2729770

CATHY WILLIQUETTE LINDSAY BROWN COUNTY RECORDER GREEN BAY, WI

RECORDED ON 12/28/2015 3:49 PM REC FEE: 30.00

EXEMPT # PAGES: 13

The above recording information verifies that this document has been electronically recorded and returned to the submitter

MORTGAGE

Record and Return To:
Mortgage Processing
Fox Communities Credit Union
2350 N Casaloma Drive Suite 200
Appleton, WI 54913
920-993-9000

Parcel ID Number: 1-2082

This instrument was drafted by: Helen Hermsen

[Space Above This Line For Recording Data]

Loan #: 5000

DEFINITIONS

Words used in multiple sections of this document are defined below and other words are defined in Sections 3, 11, 13, 18, 20 and 21. Certain rules regarding the usage of words used in this document are also provided in Section 16.

- (A) "Security Instrument" means this document, which is dated December 21, 2015, together with all Riders to this document.
- (B) "Borrower" is Andy L Kirkpatrick and Alissa J Kirkpatrick, husband and wife. Borrower is the mortgagor under this Security Instrument.
- (C) "Lender" is Fox Communities Credit Union. Lender is a State Chartered Credit Union organized and existing under the laws of THE STATE OF WISCONSIN. Lender's address is 2350 N Casaloma Drive Unit 200, Appleton, WI 54913. Lender is the mortgagee under this Security Instrument.
- (D) "Note" means the promissory note signed by Borrower and dated December 21, 2015. The Note states that Borrower owes Lender NINETY FIVE THOUSAND AND NO/100 Dollars (U.S. \$95,000.00) plus interest. Borrower has promised to pay this debt in regular Periodic Payments and to pay the debt in full not later than January 01, 2046.
- (E) "Property" means the property that is described below under the heading "Transfer of Rights in the Property."
- (F) "Loan" means the debt evidenced by the Note, plus interest, any prepayment charges and late charges due under the Note, and all sums due under this Security Instrument, plus interest.
- (G) "Riders" means all Riders to this Security Instrument that are executed by Borrower. The following Riders are to be executed by Borrower [check box as applicable]:

[X] Adjustable Rate Rider	[] Condominium Rider	[] Second Home Rider
Balloon Rider	[] Planned Unit Development Rider] VA Rider
1 1-4 Family Rider	Biweekly Payment Rider	Other(s) [specify]
()	. .	

- (H) "Applicable Law" means all controlling applicable federal, state and local statutes, regulations, ordinances and administrative rules and orders (that have the effect of law) as well as all applicable final, non-appealable judicial opinions.
- (I) "Community Association Dues, Fees, and Assessments" means all dues, fees, assessments and other charges that are imposed on Borrower or the Property by a condominium association, homeowners association or similar organization.
- (J) "Electronic Funds Transfer" means any transfer of funds, other than a transaction originated by check, draft, or similar



WISCONSIN-Single Family-Fannie Mae/Freddie Mac UNIFORM INSTRUMENT Accenture Mortgage Cadence Document Center @ 3049 01/14



paper instrument, which is initiated through an electronic terminal, telephonic instrument, computer, or magnetic tape so as to order, instruct, or authorize a financial institution to debit or credit an account. Such term includes, but is not limited to, point-of-sale transfers, automated teller machine transactions, transfers initiated by telephone, wire transfers, and automated clearinghouse transfers.

"Escrow Items" means those items that are described in Section 3. (K)

"Miscellaneous Proceeds" means any compensation, settlement, award of damages, or proceeds paid by any third party (L) (other than insurance proceeds paid under the coverages described in Section 5) for: (i) damage to, or destruction of, the Property; (ii) condemnation or other taking of all or any part of the Property; (iii) conveyance in lieu of condemnation; or (iv) misrepresentations of, or omissions as to, the value and/or condition of the Property.

"Mortgage Insurance" means insurance protecting Lender against the nonpayment of, or default on, the Loan.

"Periodic Payment" means the regularly scheduled amount due for (i) principal and interest under the Note, plus (ii) any (N)

amounts under Section 3 of this Security Instrument.

"RESPA" means the Real Estate Settlement Procedures Act (12 U.S.C. §2601 et seq.) and its implementing regulation, Regulation X (12 C.F.R. Part 1024), as they might be amended from time to time, or any additional or successor legislation or regulation that governs the same subject matter. As used in this Security Instrument, "RESPA" refers to all requirements and restrictions that are imposed in regard to a "federally related mortgage loan" even if the Loan does not qualify as a "federally related mortgage loan" under RESPA.

"Successor in Interest of Borrower" means any party that has taken title to the Property, whether or not that party has

assumed Borrower's obligations under the Note and/or this Security Instrument.

TRANSFER OF RIGHTS IN THE PROPERTY

This Security Instrument secures to Lender: (i) the repayment of the Loan, and all renewals, extensions and modifications of the Note; and (ii) the performance of Borrower's covenants and agreements under this Security Instrument and the Note. For this purpose, Borrower does hereby mortgage, grant and convey to Lender, with power of sale, the following described property located in the COUNTY of Brown:

Lot Nine (9), Block Two (2), according to the recorded Plat of Southlawn Subdivision, in the City of Green Bay, West side of Fox River, Brown County, Wisconsin.

Tax Key: 1-2082

THIS IS HOMESTEAD PROPERTY

which currently has the address of 1261 Marian Ln Green Bay, Wisconsin, 54304 ("Property Address"):

TOGETHER WITH all the improvements now or hereafter erected on the property, and all easements, appurtenances, and fixtures now or hereafter a part of the property. All replacements and additions shall also be covered by this Security Instrument. All of the foregoing is referred to in this Security Instrument as the "Property."

BORROWER COVENANTS that Borrower is lawfully seised of the estate hereby conveyed and has the right to mortgage, grant and convey the Property and that the Property is unencumbered, except for encumbrances of record. Borrower warrants and will defend generally the title to the Property against all claims and demands, subject to any encumbrances of record.

THIS SECURITY INSTRUMENT combines uniform covenants for national use and non-uniform covenants with limited variations by jurisdiction to constitute a uniform security instrument covering real property.

UNIFORM COVENANTS. Borrower and Lender covenant and agree as follows:

Payment of Principal, Interest, Escrow Items, Prepayment Charges, and Late Charges. Borrower shall pay when due the principal of, and interest on, the debt evidenced by the Note and any prepayment charges and late charges due under the Note. Borrower shall also pay funds for Escrow Items pursuant to Section 3. Payments due under the Note and this Security Instrument shall be made in U.S. currency. However, if any check or other instrument received by Lender as payment under the Note or this Security Instrument is returned to Lender unpaid, Lender may require that any or all subsequent payments due under the Note and this Security Instrument be made in one or more of the following forms, as selected by Lender: (a) cash; (b) money order; (c) certified check, bank check, treasurer's check or cashier's check, provided any such check is drawn upon an institution whose deposits are insured by a federal agency, instrumentality, or entity; or (d) Electronic Funds Transfer.

Payments are deemed received by Lender when received at the location designated in the Note or at such other location as may be designated by Lender in accordance with the notice provisions in Section 15. Lender may return any payment or partial

* 5 0 0 0 *
WISCONSIN-Single Family-Famile Mae/Freddie Mac UNIFORM INSTRUMENT Accenture Mortgage Cadence Document Center © 3049 01/14



BROWN COUNTY REGISTER OF DEEDS DOC #2729770 PG 2
Case 16-20769-beh Doc 1 Filed 02/01/16 Page 34 of 77 owner-occupied at the commencement of a foreclosure, a farm, a church, or a tax-exempt charitable organization, Borrower agrees to the provisions of Section 846.103 of the Wisconsin Statutes, and as the same may be amended or renumbered from time to time, permitting Lender, upon waiving the right to judgment for deficiency, to hold the foreclosure sale of real estate three months after a foreclosure judgment is entered.

25. Attorneys' Fees. If this Security Instrument is subject to Chapter 428 of the Wisconsin Statutes, "Reasonable

Attorneys' Fees" shall mean only those attorneys' fees allowed by that Chapter.

BY SIGNING BELOW, Borrower accepts and agrees to the terms and covenants contained in this Security Instrument and in any Rider executed by Borrower and recorded with it.

Borroweck Anny I Kirknatrick

Borower - Alissa J Kirkpatrick

[Space Below This Line for Acknowledgement]

State of Wisconsin

County of Brown

This instrument was acknowledged before me on December 21, 2015 by Andy L Kirkpatrick and Alissa J Kirkpatrick.

(Signature of notarial officer)

No-razy Public

(Title or rank)

My Commission expires: _

seal:

Origination Company: Fox Communities Credit Union

NMLSR ID: 402968 Originator: Carol A. McCallum

NMLSR ID: 698818

* M C M O R T D O T *

M C M O R T D O : ~ Form 3050 1/01 (page 10 of 10 pages

(Seal)

Loan #: 5000

ADJUSTABLE RATE RIDER

(1 Year Treasury Index - Rate Caps)

THIS ADJUSTABLE RATE RIDER is made this 21st day of December, 2015, and is incorporated into and shall be deemed to amend and supplement the Mortgage, Deed of Trust, or Security Deed (the "Security Instrument") of the same date given by the undersigned (the "Borrower") to secure Borrower's Adjustable Rate Note (the "Note") to Fox Communities Credit Union (the "Lender") of the same date and covering the property described in the Security Instrument and located at:

1261 Marian Ln, Green Bay, WI 54304 [Property Address]

THE NOTE CONTAINS PROVISIONS ALLOWING FOR CHANGES IN THE INTEREST RATE AND THE MONTHLY PAYMENT. THE NOTE LIMITS THE AMOUNT THE BORROWER'S INTEREST RATE CAN CHANGE AT ANY ONE TIME AND THE MAXIMUM RATE THE BORROWER MUST PAY.

ADDITIONAL COVENANTS. In addition to the covenants and agreements made in the Security Instrument, Borrower and Lender further covenant and agree as follows:

A. INTEREST RATE AND MONTHLY PAYMENT CHANGES

The Note provides for an initial interest rate of 3.250%. The Note provides for changes in the interest rate and the monthly payments as follows:

4. INTEREST RATE AND MONTHLY PAYMENT CHANGES

(A) Change Dates

The interest rate I will pay may change on the first day of January, 2026, and on that day every 12th month thereafter. Each date on which my interest rate could change is called a "Change Date."

(B) The Index

Beginning with the first Change Date, my interest rate will be based on an Index. The "Index" is the weekly average yield on United States Treasury securities adjusted to a constant maturity of one year, as made available by the Federal Reserve Board. The most recent Index figure available as of the date 45 days before each Change Date is

** 5 0 0 0 ** 5 0 0 0 ** ME AD J R

** TO AD J R

** ME AD J R

** MULTISTATE ADJUSTABLE RATE RIDER-ARM 5-2-Single Family--Fannie Mae/Freddie Mac UNIFORM INSTRUMENT

**Accenture Mortgage Cedence Document Center © 3186 01/14

* M C A D J R T R D R *

(Page 1 of 3 pages)

Lender information required by Lender to evaluate the intended transferee as if a new loan were being made to the transferee; and (b) Lender reasonably determines that Lender's security will not be impaired by the loan assumption and that the risk of a breach of any covenant or

agreement in this Security Instrument is acceptable to Lender.

To the extent permitted by Applicable Law, Lender may charge a reasonable fee as a condition to Lender's consent to the loan assumption. Lender may also require the transferee to sign an assumption agreement that is acceptable to Lender and that obligates the transferee to keep all the promises and agreements made in the Note and in this Security Instrument. Borrower will continue to be obligated under the Note and this Security Instrument unless Lender releases Borrower in writing.

If Lender exercises the option to require immediate payment in full, Lender shall give Borrower notice of acceleration. The notice shall provide a period of not less than 30 days from the date the notice is given in accordance with Section 15 within which Borrower must pay all sums secured by this Security Instrument. If Borrower fails to pay these sums prior to the expiration of this period, Lender may invoke any remedies permitted by this Security Instrument without further notice or demand on Borrower.

BY SIGNING BELOW, Borrower accepts and agrees to the terms and covenants contained in this Adjustable Rate Rider.

Borrower Andy L Kirkpatrick

 $\frac{1}{2}$

Borrower - Aliesa I Kirketatrick

Origination Company: Fox Communities Credit Union

NMLSR ID: 402968 Originator: Carol A. McCallum

NMLSR ID: 698818

* 5 0 0 0 ★ M CALLET AND STRUMENT ADDITIONAL MANUALISTATE ADJUSTABLE RATE RIDER-ARM 5-2-Single Family—Fannie Mae/Freddie Mac UNIFORM !NSTRUMENT Accenture Mortgage Cadence Document Center © 3186 01/14

Form 3111 1/01 (Page 3 of 3 pages)

BROWN COUNTY REGISTER OF DEEDS DOC #2722770 PG 13 Doc 1 Filed 02/01/16 Page 37 of 77

	ormation to identify your case:			
Debtor 1	Andy L. Kirkpatrick			
	First Name	Middle Name Last Name		
Debtor 2	Alissa J. Kirkpatrick First Name	Middle Norse		
(Spouse if, filing)	First Name	Middle Name Last Name		
United States I	Bankruptcy Court for the: EAS	TERN DISTRICT OF WISCONSIN		
Case number				
(if known)			[Check if this is an
				amended filing
Official Fo	rm 1065/5			
	<u>rm 106E/F</u>			40/45
<u>Scheaule</u>	E/F: Creditors who	Have Unsecured Claims	i	12/15
	All of Your PRIORITY Unsecur			
1. Do any cred	itors have priority unsecured claims	s against you?		
No. Go to	Part 2.			
☐ Yes.				
Part 2: List	All of Your NONPRIORITY Uns	secured Claims		
3. Do any cred	itors have nonpriority unsecured cl			
_ `			edules.	
□ No. You		aims against you?	edules.	
☐ No. You	nave nothing to report in this part. Sub	aims against you? mit this form to the court with your other sch		
Yes. 4. List all of you claim, list the	nave nothing to report in this part. Sub our nonpriority unsecured claims in a creditor separately for each claim. For	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who reach claim listed, identify what type of clain	b holds each claim. If a creditor has more mit is. Do not list claims already included in	Part 1. If more than one
Yes. 4. List all of you claim, list the	nave nothing to report in this part. Sub our nonpriority unsecured claims in a creditor separately for each claim. For	aims against you? mit this form to the court with your other sch	b holds each claim. If a creditor has more mit is. Do not list claims already included in	Part 1. If more than one nuation Page of Part 2.
☐ No. You ☐ Yes. 4. List all of your claim, list the creditor holds	nave nothing to report in this part. Sub our nonpriority unsecured claims in c creditor separately for each claim. Fo s a particular claim, list the other credi	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who or each claim listed, identify what type of clai tors in Part 3.If you have more than three no	o holds each claim. If a creditor has more a m it is. Do not list claims already included in npriority unsecured claims fill out the Contin	Part 1. If more than one nuation Page of Part 2. Total claim
☐ No. You ☐ Yes. 4. List all of your claim, list the creditor hold: 4.1 Best I	our nonpriority unsecured claims in creditor separately for each claim. For a particular claim, list the other creditor Services	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who reach claim listed, identify what type of clain	o holds each claim. If a creditor has more a m it is. Do not list claims already included in npriority unsecured claims fill out the Contin	Part 1. If more than one nuation Page of Part 2.
☐ No. You ☐ Yes. 4. List all of your claim, list the creditor hold: 4.1 Best	our nonpriority unsecured claims in a creditor separately for each claim. For a particular claim, list the other crediting the credit Services Buy Credit Services rity Creditor's Name	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who or each claim listed, identify what type of clai tors in Part 3.If you have more than three no	o holds each claim. If a creditor has more a m it is. Do not list claims already included in npriority unsecured claims fill out the Contin	Part 1. If more than one nuation Page of Part 2. Total claim
Yes. 4. List all of your claim, list the creditor hold: 4.1 Best I Nonprior Citiba P.O. E	nave nothing to report in this part. Subsur nonpriority unsecured claims in a creditor separately for each claim. For a particular claim, list the other creditions are credited to see the control of th	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who or each claim listed, identify what type of clai tors in Part 3.If you have more than three no	b holds each claim. If a creditor has more of mit is. Do not list claims already included in a npriority unsecured claims fill out the Continuation in the continuatio	Part 1. If more than one nuation Page of Part 2. Total claim
Yes. 4. List all of your claim, list the creditor hold: 4.1 Best I Nonprior Citibat P.O. E Sioux	our nonpriority unsecured claims in a creditor separately for each claim. For a particular claim, list the other credit services Buy Credit Services rity Creditor's Name Ink Box 6500 Falls, SD 57117	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who or each claim listed, identify what type of clai tors in Part 3.If you have more than three no Last 4 digits of account number When was the debt incurred?	b holds each claim. If a creditor has more of mit is. Do not list claims already included in a noriority unsecured claims fill out the Continuation in the continuatio	Part 1. If more than one nuation Page of Part 2. Total claim
Yes. 4. List all of your claim, list the creditor hold: 4.1 Best I Nonprior Citiba P.O. E Sioux Number	our nonpriority unsecured claims in a creditor separately for each claim. For a particular claim, list the other credit services rity Creditor's Name and Sox 6500. Falls, SD 57117 Street City State Zlp Code	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who or each claim listed, identify what type of clai tors in Part 3.If you have more than three no	b holds each claim. If a creditor has more of mit is. Do not list claims already included in a noriority unsecured claims fill out the Continuation in the continuatio	Part 1. If more than one nuation Page of Part 2. Total claim
Yes. 4. List all of your claim, list the creditor hold: 4.1 Best Nonprior Citibate P.O. E. Sioux Number Who in	our nonpriority unsecured claims in creditor separately for each claim. For a particular claim, list the other creditor Services Buy Credit Services rity Creditor's Name Ink Box 6500 Falls, SD 57117 Street City State Zlp Code curred the debt? Check one.	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who or each claim listed, identify what type of clai tors in Part 3.If you have more than three no Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	b holds each claim. If a creditor has more of mit is. Do not list claims already included in a noriority unsecured claims fill out the Continuation in the continuatio	Part 1. If more than one nuation Page of Part 2. Total claim
Yes. 4. List all of you claim, list the creditor hold: 4.1 Best Nonprior Citiba P.O. E Sioux Number Who in the Debut No Policy No Policy Number Num	nave nothing to report in this part. Substitute nonpriority unsecured claims in a creditor separately for each claim. For a particular claim, list the other creditors appeared to particular claim. For substitutions are considered to the claim of the constitution of the constitutio	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who or each claim listed, identify what type of clair tors in Part 3.If you have more than three no Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent	b holds each claim. If a creditor has more of mit is. Do not list claims already included in a noriority unsecured claims fill out the Continuation in the continuatio	Part 1. If more than one nuation Page of Part 2. Total claim
Yes. 4. List all of your claim, list the creditor hold: 4.1 Best I Nonprior Citibat P.O. E Sioux Number Who in the Deb	nave nothing to report in this part. Subsur nonpriority unsecured claims in a creditor separately for each claim. For a particular claim, list the other credital services rity Creditor's Name and Box 6500 Falls, SD 57117 Street City State Zlp Code curred the debt? Check one. tor 1 only tor 2 only	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who reach claim listed, identify what type of clait tors in Part 3.If you have more than three no Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated	b holds each claim. If a creditor has more of mit is. Do not list claims already included in a noriority unsecured claims fill out the Continuation in the continuatio	Part 1. If more than one nuation Page of Part 2. Total claim
Yes. 4. List all of yeclaim, list the creditor hold: 4.1 Best Nonprior Citibar P.O. E. Sioux Number Who in Deb	nave nothing to report in this part. Subsur nonpriority unsecured claims in creditor separately for each claim. For a particular claim, list the other credital services rity Creditor's Name ink and a service services. The control of the current o	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who or each claim listed, identify what type of clair tors in Part 3.If you have more than three no Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent	b holds each claim. If a creditor has more of mit is. Do not list claims already included in npriority unsecured claims fill out the Continuation of the continuation	Part 1. If more than one nuation Page of Part 2. Total claim
Yes. 4. List all of your claim, list the creditor hold: 4.1 Best Nonprior Citibate P.O. E. Sioux Number Who in Deb Deb Deb	nave nothing to report in this part. Subsur nonpriority unsecured claims in a creditor separately for each claim. For a particular claim, list the other credital services rity Creditor's Name and Box 6500 Falls, SD 57117 Street City State Zlp Code curred the debt? Check one. tor 1 only tor 2 only	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who reach claim listed, identify what type of clait tors in Part 3.If you have more than three no Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed	b holds each claim. If a creditor has more of mit is. Do not list claims already included in npriority unsecured claims fill out the Continuation of the continuation	Part 1. If more than one nuation Page of Part 2. Total claim
Yes. 4. List all of your claim, list the creditor hold: 4.1 Best I Nonprior Citibat P.O. E Sioux Number Who in the Deb Deb At let Che	cur nonpriority unsecured claims in e creditor separately for each claim. For a particular claim, list the other creditors a particular claim, list the other creditors a particular claim, list the other creditors Name and Sox 6500 Falls, SD 57117 Street City State ZIp Code curred the debt? Check one. tor 1 only tor 2 only tor 1 and Debtor 2 only tast one of the debtors and another ck if this claim is for a community.	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who or each claim listed, identify what type of clait tors in Part 3.If you have more than three no Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure	b holds each claim. If a creditor has more of mit is. Do not list claims already included in npriority unsecured claims fill out the Continuation of the continuation	n Part 1. If more than one huation Page of Part 2. Total claim \$493.00
Yes. 4. List all of your claim, list the creditor hold: 4.1 Best I Nonprior Citibat P.O. E Sioux Number Who in the Deb Deb At let Che	nave nothing to report in this part. Subsequence of the condition of the creditor separately for each claim. For a particular claim, list the other credition of the credition of the condition o	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who or each claim listed, identify what type of clait tors in Part 3.If you have more than three no Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans debt Obligations arising out of a sepreport as priority claims	b holds each claim. If a creditor has more of mit is. Do not list claims already included in npriority unsecured claims fill out the Contine 8903 2009 I is: Check all that apply and claim:	n Part 1. If more than one huation Page of Part 2. Total claim \$493.00
Yes. 4. List all of yeclaim, list the creditor hold: 4.1 Best I Nonprio Citiba P.O. E Sioux Number Who in Deb Deb At le	cur nonpriority unsecured claims in e creditor separately for each claim. For a particular claim, list the other creditors a particular claim, list the other creditors a particular claim, list the other creditors Name and Sox 6500 Falls, SD 57117 Street City State ZIp Code curred the debt? Check one. tor 1 only tor 2 only tor 1 and Debtor 2 only tast one of the debtors and another ck if this claim is for a community.	aims against you? mit this form to the court with your other sch the alphabetical order of the creditor who or each claim listed, identify what type of clait tors in Part 3.If you have more than three no Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecure Student loans debt Obligations arising out of a sep	b holds each claim. If a creditor has more of mit is. Do not list claims already included in a noriority unsecured claims fill out the Continuation of the Continuatio	n Part 1. If more than one huation Page of Part 2. Total claim \$493.00

Official Form 106 E/F

			.
Cabela's Club Visa Jonpriority Creditor's Name	Last 4 digits of account number	4956	\$3,915.00
P.O. Box 82608	When was the debt incurred?		
Lincoln, NE 68501-2608 Jumber Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Vho incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.	
\square At least one of the debtors and another	Student loans	d Claim.	
Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Credit Card	<u> </u>	
Cabela's Club Visa	Last 4 digits of account number	4558	\$3,679.00
lonpriority Creditor's Name P.O. Box 82608	When was the debt incurred?		
incoln, NE 68501-2608			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community debt	☐ Student loans		
s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Credit Card	<u>d</u>	
Capital One-Menards	Last 4 digits of account number	1782	\$1,166.00
lonpriority Creditor's Name PO Box 30285	When was the debt incurred?	2013	
Salt Lake City, UT 84130-0285 Jumber Street City State Zlp Code	As of the date you file, the claim i	s. Check all that apply	
Vho incurred the debt? Check one.	As of the date you me, the dam'r	3. Oncok all that apply	
☐ Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d alaim.	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	u Glaiiii.	
Check if this claim is for a community debt		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	<u> </u>	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	

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Debtor	1 1		Coco number (it brown)	
Debtor	2 Alissa J. Kirkpatrick		Case number (if know)	
4.5	Citibank	Last 4 digits of account number	4313	\$2,037.00
	Nonpriority Creditor's Name P.O. Box 6500	When was the debt incurred?	7/15	
	Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	_	Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	☐ Student loans		
	■ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.6	Comenity Bank New York & Co.	Last 4 digits of account number	7938	\$240.00
	Nonpriority Creditor's Name			· · · · · · · · · · · · · · · · · · ·
	Bankruptcy Department	When was the debt incurred?	2013	
	P.O. Box 182125 Columbus, OH 43218-2125			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	_	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Charge acc	count	
4.7	Comenity Bank-Gander Mountain	Last 4 digits of account number	2875	\$4,023.00
	Nonpriority Creditor's Name Bankruptcy Department	When was the debt incurred?	2012	
	P.O. Box 182125			
	Columbus, OH 43218-2125			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	1		
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	1 claim:	
	☐ At least one of the debtors and another	Student loans	a Claiii.	
	■ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other Specify Credit card	purchases	
		— Other. Specify		

ebtor 2 Alissa J. Kirkpatrick		Case number (if know)	
Comenity Bank-Victoria's Secret	Last 4 digits of account number	3824	\$117.00
Nonpriority Creditor's Name Bankruptcy Department P.O. Box 182125	When was the debt incurred?	2014	
Columbus, OH 43218-2125			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
☐ Debtor 1 only			
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed	d alaim.	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:	
■ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Charge acc	count	
Comenity Bank-Younkers	Last 4 digits of account number	3157	\$828.00
Nonpriority Creditor's Name	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	2014	
Bankruptcy Department P.O. Box 182125	When was the debt incurred?	2011	
Columbus, OH 43218-2125			
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
<u> </u>	☐ Student loans		
■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Charge acc	count	
Community First Credit Union	Last 4 digits of account number	6159	\$12,700.00
Nonpriority Creditor's Name	-		•
PO Box 1487	When was the debt incurred?	2014	
Appleton, WI 54912-1487 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	, 10 0. 11.0 date you me, 11.0 claim.	er chook all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
	Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	☐ Student loans		
■ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Other. Specify Personal Id		

Alissa J. Kirkpatrick		Case number (if know)	
Community First Credit Union	Last 4 digits of account number	5926	\$7,213.00
Nonpriority Creditor's Name PO Box 1487 Appleton, WI 54912-1487	When was the debt incurred?	2012	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	<u>_</u>		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
	Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	☐ Student loans		
Check if this claim is for a community deb ls the claim subject to offset?	D Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Care	d	
2 Discover	Last 4 digits of account number	6299	\$4,178.00
Nonpriority Creditor's Name	_		
DB Servicing Corporation	When was the debt incurred?	2010	
P.O. Box 3025 New Albany, OH 43054-3025			
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
<u>_</u>	Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	☐ Student loans		
Check if this claim is for a community deb ls the claim subject to offset?	DObligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit card	d purchases	
3 Elan	Last 4 digits of account number	8531	\$4,519.00
Nonpriority Creditor's Name	When was the debt incurred?	2011	
Cardmember Services PO Box 790084	When was the dept incurred?	2011	
Saint Louis, MO 63179-0084			
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
☐ Debtor 2 only	Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
_	Student loans		
Check if this claim is for a community deb Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card	d purchases	

or 2 Alissa J. Kirkpatrick		Case number (if know)	
Furniture Row	Last 4 digits of account number	4443	\$2,451.00
Nonpriority Creditor's Name Capital One P.O. Box 30295	When was the debt incurred?	2011	
Salt Lake City, UT 84130-0285			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
☐ Debtor 2 only	☐ Disputed		
■ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
☐ At least one of the debtors and another	☐ Student loans	a diami.	
■ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	■ Other Specify Credit card	l purchases	
HSHS Division Eastern WI Nonpriority Creditor's Name	Last 4 digits of account number	7729	\$622.00
25870 Network Place Chicago, IL 60673-1258	When was the debt incurred?	7/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans		
■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical		
Internal Revenue Service	Last 4 digits of account number		\$0.00
Nonpriority Creditor's Name	When was the debt incurred?		
Centralized Insolvency P.O. Box 7346	when was the dept incurred?		
Philadelphia, PA 19101-7346			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent		
Debtor 1 only			
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
\square At least one of the debtors and another	Student loans	. J.	
■ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
· · -	Other. Specify Notice only	•	

ebtor 2 Alissa J. Kirkpatrick		Case number (if know)	
7 Kohls	Last 4 digits of account number	1838	\$1,658.00
Nonpriority Creditor's Name Attn: Recovery PO Box 3043	When was the debt incurred?	2012	
Milwaukee, WI 53201-3043			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Student loans		
■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Charge acc	count	
8 Prevea Health	Last 4 digits of account number	0267	\$1,966.00
Nonpriority Creditor's Name PO Box 19041	When was the debt incurred?	2015	
Green Bay, WI 54307	when was the debt incurred?	2015	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	_		
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
<u> </u>	☐ Student loans		
Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Medical		
9 Sears Credit Cards	Last 4 digits of account number	3786	\$3,639.00
Nonpriority Creditor's Name PO Box 6282	When was the debt incurred?	2012	
Sioux Falls, SD 57117-6282 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that annly	
Who incurred the debt? Check one.	As of the date you me, the dam'r	3. Oncor all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
_	☐ Disputed		
■ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	☐ Student loans		
Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	■ Other Specify Credit card		

	1 Andy L. Kirkpatrick			
Debtor	Alissa J. Kirkpatrick		Case number (if know)	
4.20	Synchrony Bank - Care Credit	Last 4 digits of account number	4229	\$4,381.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department P.O. Box 965060	When was the debt incurred?	2008	
	Orlando, FL 32896-5060			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	Пол		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	■ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	

4.21	Synchrony Bank - Gap Nonpriority Creditor's Name	Last 4 digits of account number	4759	\$8,044.00
	P.O. Box 103104	When was the debt incurred?	2012	
	Roswell, GA 30076			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	_ '		
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	I alaim.	
	☐ At least one of the debtors and another	Student loans	i Claiii.	
	■ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.22	Synchrony Bank - JC Penny	Last 4 digits of account number	4881	\$231.00
	Nonpriority Creditor's Name	Zaot 4 digito of account number		Ψ201.00
	PO Box 103104	When was the debt incurred?		
	Roswell, GA 30076			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
		☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	\square At least one of the debtors and another	☐ Student loans		
	■ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divolce that you did 110t	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other Specify Charge acc	count	

	133a J. 1	Kirkpatrick		Ouco II	umber (if know)	
		Revenue	Last 4 digits of account number	\$0.00		
Spec P.O.	cial Pro Box 89	litor's Name cedures Union 101 II 53708-8091	When was the debt incurred?			
		City State Zlp Code	As of the date you file, the claim is	: Check	all that apply	
Who i	ncurred t	he debt? Check one.	☐ Contingent			
☐ De	btor 1 only	у	_			
☐ De	btor 2 only	y	☐ Unliquidated			
■ De	btor 1 and	Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	claim:		
☐ At	least one	of the debtors and another	Student loans	Ciaiii.		
■ Ch	eck if this	s claim is for a community debt	☐ Obligations arising out of a separation	otion on	roomant or divorce that you did no	
		oject to offset?	report as priority claims	alion agi	eement of divorce that you did no	
■ No)		☐ Debts to pension or profit-sharing	g plans, a	and other similar debts	
□Ye	s		■ Other. Specify Notice only	,		
more than or any debts in lame and Addr	ne credito Parts 1 o	r for any of the debts that you liste r 2, do not fill out or submit this pa On Lin	which entry in Part 1 or Part 2 did you e of (Check one):	reditors ist the or art 1: Cre	here. If you do not have addition	nal persons to be notified for ims
more than or any debts in lame and Addr NONE-	ne credito Parts 1 or ress d the An	r for any of the debts that you lister 2, do not fill out or submit this pa On Lin Las nounts for Each Type of Unse	d in Parts 1 or 2, list the additional of ge. which entry in Part 1 or Part 2 did you be of (Check one): P t 4 digits of account number	reditors ist the or art 1: Cre art 2: Cre	here. If you do not have addition iginal creditor? editors with Priority Unsecured Claditors with Nonpriority Unsecured	here. Similarly, if you have nal persons to be notified for ims Claims
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Fill in this information to identify your case:						
Debtor 1	Andy L. Kirkpatri	ck				
	First Name	Middle Name	Last Name			
Debtor 2	Alissa J. Kirkpatı	rick				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F WISCONSIN			
Case number _					☐ Check if this is an amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			_
	140111001	Olloot			
	City		State	ZIP Code	_
2.3					
	Name				=
	Number	Street			_
	Number	Olicci			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	Number	Sileet			
	City		State	ZIP Code	_
2.5	· <i></i>				
	Name				_
	Number	Street			_
	Nullibel	Sueer			
	City		State	ZIP Code	_
	-,				

Page 47 of 77

					1
Fill in thi	s information to identify yo	ur case:			
Debtor 1	Andy L. Kirkpa	trick			
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, f	Alissa J. Kirkpa	Atrick Middle Name	Last Name		
	ates Bankruptcy Court for the				
Orintou of	acco Barmaptoy Court for the		o. mooditont		
Case nur	mber				
(if known)					Check if this is an amended filing
] amended ming
Officia	al Form 106H				
	dule H: Your Co	dobtors			4045
Scrie	dule II. Toul Co	uentoi s			12/15
fill it out, your nam	and number the entries in t e and case number (if knov	he boxes on the left. Atta vn). Answer every questio	ch the Additional Page t n.	o this page. On the to	needed, copy the Additional Page, op of any Additional Pages, write
1. Do	you have any codebtors?	(If you are filing a joint case	, do not list either spouse	as a codebtor.	
■ No)				
□ Ye					
Arizo 	ithin the last 8 years, have yona, California, Idaho, Louisia				rty states and territories include .)
□Y€	es. Did your spouse, former s	pouse, or legal equivalent li	ve with you at the time?		
in lin Form	ne 2 again as a codebtor on n 106D), Schedule E/F (Offic ut Column 2.	ly if that person is a guara	intor or cosigner. Make	sure you have listed 06G). Use Schedule D	ng with you. List the person show the creditor on Schedule D (Officia), Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State an	d ZIP Code		Column 2: The cr Check all schedu	reditor to whom you owe the debt les that apply:
3.1				☐ Schedule D, lii	ne
0.1	Name			_ ☐ Schedule E/F,	
				☐ Schedule G, li	
	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, lii	20
3.2	Name			_ ′	line
				☐ Schedule E/F,	
	Nember				
	Number Street City	State	ZIP Code		
	- •		5545		

Fill in this information	on to identify your case:	
Debtor 1	Andy L. Kirkpatrick	
Debtor 2 (Spouse, if filing)	Alissa J. Kirkpatrick	
United States Bankı	ruptcy Court for the: EASTERN DISTRICT OF WISCONSIN	
Case number		Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:

Official Form 106I

MM / DD/ YYYY

Schedule I: Your Income

12/15

page 1

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	□ Not employed
employers.	Occupation	Designer	Office Manager
Include part-time, seasonal, or self-employed work.	Employer's name	Wisconsin Plastics, Inc.	Midwest Dental Inc.
Occupation may include student or homemaker, if it applies.	Employer's address	3155 Commodity Lane Green Bay, WI 54307	P.O. Box 69 Mondovi, WI 54755
	How long employed th	nere? 10/07 to present	6/07 to present

Part 2: Give Details About Monthly Income

Official Form 106I

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 4,425.35 \$ 3,732.34

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Case 16-20769-beh Doc 1 Sciled 02/01/166ne Page 49 of 77

Debtor 1 Andy L. Kirkpatrick Alissa J. Kirkpatrick

Case number (if known)

				Fo	or Debtor 1		or Debtor on-filing s		
	Copy	y line 4 here	4.	\$	4,425.35	\$	3,	732.34	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,013.05	\$		788.42	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	221.02	\$		335.92	-
	5d.	Required repayments of retirement fund loans	5d.	\$	339.50	\$		0.00	-
	5e.	Insurance	5e.	\$	0.00	\$		408.22	-
	5f.	Domestic support obligations	5f.	\$	0.00	\$		0.00	-
	5g.	Union dues	5g.	\$	0.00	\$		0.00	
	5h.	Other deductions. Specify: Flex	5h.+	+ \$	0.00	+ \$		83.34	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,573.57	\$	1,	615.90	-
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,851.78	\$	2,	116.44	-
8.	8a. 8b. 8c.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		\$_ \$_	0.00	\$_		0.00	
		settlement, and property settlement.	8c.	\$_	0.00	\$_		0.00	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$_		0.00	
	8e.	Social Security	8e.	\$_	0.00	\$		0.00	-
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: Norwex Independent Consultant	8f. 8g. 8h.+	\$_ \$_ + \$_	0.00 0.00 0.00	\$ \$ + \$		0.00 0.00 154.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$		154.00)
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,851.78 + \$_	2	2,270.44	= \$	5,122.22
11.	Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your refriends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not sifty:	deper						0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certales						\$	5,122.22
							l	Combin	ned y income
13.	Do y ■	ou expect an increase or decrease within the year after you file this form No.	?					•	-
		Yes. Explain:							

Fill in this inform								
	ation to identify your						_	
Debtor 1	Andy L. Kirkpa	trick			Ch	eck if this	is: nded filing	
Debtor 2 Spouse, if filing)	Alissa J. Kirkp	atrick				A supple	ement show	wing postpetition cha the following date:
Inited States Bank	ruptcy Court for the:	EASTER	N DISTRICT OF WISCO	NSIN		MM / DE) / YYYY	
case number f known)								
Official Fo	orm 106J							
Schedule	J: Your Ex	xpens	ses					
Part 1: Desc Is this a joi No. Go t Yes. Do	wn). Answer every of cribe Your Househo int case? to line 2. es Debtor 2 live in a	question. old a separat					ges, write	your name and cas
		□No	,	,				
Do not list I and Debtor		YAS	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Depe age	endent's	Does dependent live with you?
Do not state dependents				Son		6		□ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes
expenses of	penses include of people other that nd your dependents	- 110						Yes
	nate Your Ongoing	r bankrup	otcy filing date unless y	ou are using this fo	orm as a	suppleme		
stimate your e xpenses as of	a date after the bar	nkruptcy	is filed. If this is a supp			the box a	it the top o	of the form and fill i
stimate your e xpenses as of pplicable date nclude expense ne value of suc	a date after the bar . es paid for with not ch assistance and h	n-cash g	is filed. If this is a supp overnment assistance in uded it on Schedule I: \	elemental <i>Schedule</i> f you know		the box a	Your exp	
stimate your expenses as of pplicable date. Include expense value of such official Form 1	a date after the bar es paid for with nor ch assistance and h 06I.)	n-cash go nave incli	overnment assistance i uded it on <i>Schedule I:</i> \text{} es for your residence. In	elemental <i>Schedule</i> f you know ou <i>r Incom</i> e	J, check		·	
stimate your expenses as of oplicable date. Include expense value of such official Form 1 The rental payments a	a date after the bar es paid for with nor ch assistance and h 06l.) or home ownership	n-cash go nave incli	overnment assistance i uded it on <i>Schedule I:</i> \text{} es for your residence. In	elemental <i>Schedule</i> f you know ou <i>r Incom</i> e	J, check		·	enses
stimate your expenses as of pplicable date. Include expense value of succeptions of the control	a date after the bar es paid for with nor ch assistance and h 06l.) or home ownership and any rent for the g	n-cash go nave incli	overnment assistance i uded it on <i>Schedule I:</i> \text{} es for your residence. In	elemental <i>Schedule</i> f you know ou <i>r Incom</i> e	J, check	\$	·	enses
stimate your expenses as of pplicable date. Include expense value of such official Form 1 The rental payments a lf not inclu 4a. Real 4b. Prope	a date after the bar. es paid for with norch assistance and hold.) or home ownership and any rent for the goded in line 4: estate taxes erty, homeowner's, compared to the part of the godes.	n-cash go nave inclusion o expension ground or	overnment assistance in uded it on Schedule I: Yes for your residence. In lot.	elemental <i>Schedule</i> f you know ou <i>r Incom</i> e	4a. 4b.	\$ \$	·	653.00 0.00 50.00
stimate your expenses as of oplicable date. Include expense as of oplicable date. If not include as of oplicable date. If not include date. If not include date.	a date after the bar. es paid for with norch assistance and hold.) or home ownership and any rent for the goded in line 4: estate taxes	n-cash go nave inclusion o expension ground or or renter's nir, and up	overnment assistance is uded it on Schedule I: Yes for your residence. In lot. insurance okeep expenses	elemental <i>Schedule</i> f you know ou <i>r Incom</i> e	4a.	\$ \$ \$ \$	·	653.00 0.00

		Kirkpatrick	2000 num	abor (if known)	
Der	otor 2 Alissa J	. NIINPAUICK	Jase Hull	nber (if known)	
6.	Utilities:				
	•	r, heat, natural gas	6a.		150.00
		ewer, garbage collection	6b.		49.00
	•	e, cell phone, Internet, satellite, and cable services	6c.	· -	270.00
	6d. Other. Sp	·	6d.	· —	0.00
7.		sekeeping supplies	7.	·	650.00
8.		children's education costs	8.		340.00
9.	O /	dry, and dry cleaning	9.		180.00
		products and services	10.	·	150.00
	Medical and de	•	11.	\$	200.00
	Do not include of		12.	·	450.00
		clubs, recreation, newspapers, magazines, and books	13.	\$	125.00
14.	Charitable con	tributions and religious donations	14.	\$	25.00
15.	Insurance.				
		nsurance deducted from your pay or included in lines 4 or 20.	4-	•	
	15a. Life insur		15a.	· —	52.00
	15b. Health ins		15b.	· -	0.00
	15c. Vehicle in		15c.	·	105.00
	15d. Other ins	• • •	15d.	\$	0.00
16.	Taxes. Do not in Specify:	nclude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
17.		lease payments:			
		ents for Vehicle 1	17a.	·	0.00
	' '	ents for Vehicle 2	17b.	·	0.00
	17c. Other. Sp		17c.	·	0.00
	17d. Other. Sp	•	17d.	\$	0.00
18.		of alimony, maintenance, and support that you did not report as your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
10		s you make to support others who do not live with you.	10.	\$	0.00
10.	Specify:	3 you make to support others who do not live with you.	19.	·	0.00
20	· · · —	perty expenses not included in lines 4 or 5 of this form or on Scheo			
20.		s on other property	20a.		0.00
	20b. Real esta		20b.	·	0.00
		homeowner's, or renter's insurance	20c.		0.00
		nce, repair, and upkeep expenses	20d.	·	0.00
		ner's association or condominium dues	20e.	·	0.00
21	Other: Specify:	Cigarettes		+\$	25.00
۷.,	Pet expenses	`		+\$	150.00
	ret expenses			ΤΨ	150.00
22.	Calculate your	monthly expenses			
	22a. Add lines 4	through 21.		\$	3,874.00
	22b. Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22	2a and 22b. The result is your monthly expenses.		\$	3,874.00
23.	Calculate your	monthly net income.			
	23a. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	5,122.22
		r monthly expenses from line 22c above.	23b.	-\$	3,874.00
		your monthly expenses from your monthly income. t is your <i>monthly net income</i> .	23c.	\$	1,248.22
		•			
24.	For example, do you modification to the	an increase or decrease in your expenses within the year after you ou expect to finish paying for your car loan within the year or do you expect your mo terms of your mortgage?			or decrease because of a
	■ No.	le			
	☐ Yes.	Explain here:			

Fill in this inform	nation to identify y	our case:			
Debtor 1	Andy L. Kirkp	atrick			1
	First Name	Middle Name	Las	t Name	
Debtor 2	Alissa J. Kirk	atrick			
(Spouse if, filing)	First Name	Middle Name	Las	t Name	
United States Ba	nkruptcy Court for the	e: EASTERN DISTRICT O	OF WISCON	SIN	
Case number					☐ Check if this is an amended filing
Official Form Declarat	_	: an Individual	Debto	or's Schedules	12/15
If two married pe	ople are filing toge	ther, both are equally respons	onsible for s	supplying correct information.	
obtaining money	or property by frai				atement, concealing property, or 000, or imprisonment for up to 20
Sign	n Below				
Did you pay	y or agree to pay so	omeone who is NOT an atto	rney to help	you fill out bankruptcy forms?	
■ No					
☐ Yes. N	lame of person				ankruptcy Petition Preparer's Notice,
				Declaration	on, and Signature (Official Form 119)
	ty of perjury, I dec	are that I have read the sun	nmary and s	schedules filed with this declara	ition and
X /s/ And	y L. Kirkpatrick		Х	/s/ Alissa J. Kirkpatrick	
Andy L	. Kirkpatrick e of Debtor 1			Alissa J. Kirkpatrick Signature of Debtor 2	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Date February 1, 2016

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Date February 1, 2016

1311	Lin this inform	nation to identify you	r case:			
	btor 1					
	DIOI I	Andy L. Kirkpatr	Middle Name	Last Name		
De	btor 2	Alissa J. Kirkpat	rick			
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	WISCONSIN		
Ca	se number					
(if k	nown)				_	theck if this is an mended filing
_						
	fficial Fo		A 66 - 100 - 100 - 110 - 110 - 110 - 110 - 110 - 110 - 110 - 110 - 110 - 110 - 110 - 110 - 110 - 110 - 110 - 1	lees le Filie e (ee D		
			Affairs for Individ			12/15
					e equally responsible for sup y additional pages, write yo	
nur	nber (if know	n). Answer every ques	stion.			
Pa	rt 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	MarriedNot mar	ried				
_			Providence of the discount			
2.	During the is	ast 3 years, nave you	lived anywhere other than	wnere you live now?		
	■ No					
	☐ Yes. Lis	t all of the places you i	ived in the last 3 years. Do n	ot include where you live nov	V.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3.					nity property state or territor ico, Texas, Washington and V	
Stat	es and territori	es include Anzona, Ca	iliomia, luano, Louisiana, Ne	vada, New Mexico, Fuello R	ico, rexas, wasiingion and v	VISCOTISITI.)
	■ No					
	☐ Yes. Ma	ike sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.			nployment or from operating u received from all jobs and a		ear or the two previous cale	ndar years?
			have income that you receiv			
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,085.00	■ Wages, commissions, bonuses, tips	\$3,732.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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	ndy L. Kirkpatrick lissa J. Kirkpatrick		Cas	e number (if known)		
		Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
For last cale (January 1 to	ndar year: o December 31, 2015)	■ Wages, commissions, bonuses, tips	\$53,104.00	■ Wages, combonuses, tips	nmissions,	\$47,614.00
		☐ Operating a business		☐ Operating a	business	
	ndar year before that: o December 31, 2014)	■ Wages, commissions, bonuses, tips	\$45,963.00	■ Wages, combonuses, tips	nmissions,	\$41,445.00
		☐ Operating a business		☐ Operating a	business	
☐ Yes	. Fill in the details.	Debtor 1 Sources of income Describe below	Gross income (before deductions and	Debtor 2 Sources of incomposition Describe below		Gross income (before deductions
□ res	. Fill III the details.	D.I.		D.I.		
			(before deductions and exclusions)			
Part 3: Lis	st Certain Payments You	u Made Before You Filed for	Bankruptcy			
i. Are eithe □ No.	Neither Debtor 1 nor	2's debts primarily consume Debtor 2 has primarily consu a personal, family, or househo	umer debts. Consumer debt	's are defined in 1	1 U.S.C. § 10	1(8) as "incurred by ar
	☐ No. Go to line ☐ Yes List below	each creditor to whom you pai	id a total of \$6,225* or more	in one or more pa	yments and t	the total amount you
	not include	reditor. Do not include paymer e payments to an attorney for that on 4/01/16 and every 3 year	his bankruptcy case.			
■ Yes		or both have primarily consumers you filed for bankruptcy, di		al of \$600 or more	?	
	include pay	7. each creditor to whom you pai yments for domestic support o y for this bankruptcy case.				
Credito	r's Name and Address	Dates of payme	nt Total amount	Amount you	Was this p	payment for
Comm	unity First Cradit Unit	on Monthly	paid \$1,002,00	still owe	□ N4= 1	
PO Bo	unity First Credit Unio x 1487 on, WI 54912-1487	on Monthly	\$1,092.00	\$10,803.00	☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Re ☐ Supplie	Card

☐ Other__

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	otor 2 Alissa J. Kirkpatrick			se number (if known)	
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Community First Credit Union PO Box 1487	Monthly	\$1,131.00	\$10,373.00	☐ Mortgage ■ Car
	Appleton, WI 54912-1487				☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
	Fox Communities Credit Union 3401 E. Calumet Street Appleton, WI 54915	Monthly	\$1,959.00	\$0.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
	Within 1 year before you filed for bankrup Insiders include your relatives; any general proporations of which you are an officer, directly including one for a business you operate as support and alimony.	partners; relatives of any ge ector, person in control, or	eneral partners; partners owner of 20% or more	erships of which your of their voting sec	ou are a general partner; curities; and any managing agent,
	Yes. List all payments to an insider				
		D ()			
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co	otcy, did you make any pa	paid	still owe	
	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co No Yes. List all payments to an insider	otcy, did you make any pa	paid	still owe	
	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co	otcy, did you make any pa	paid	still owe	. ,
aı	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co No Yes. List all payments to an insider	otcy, did you make any pa osigned by an insider. Dates of payment	paid yments or transfer a Total amount	still owe any property on a Amount you	ccount of a debt that benefited Reason for this payment
ar	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co No Yes. List all payments to an insider Insider's Name and Address	Dates of payment Dates, and Foreclosures Otcy, were you a party in a	paid nyments or transfer a Total amount paid nny lawsuit, court ac	still owe any property on a Amount you still owe	Reason for this payment Include creditor's name
ar	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or conclude Payments on debts guaranteed or conclude Payments to an insider Insider's Name and Address 4: Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injuries.	Dates of payment Dates, and Foreclosures Otcy, were you a party in a	paid nyments or transfer a Total amount paid nny lawsuit, court ac	still owe any property on a Amount you still owe	Reason for this payment Include creditor's name
ar	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or conclude payments on debts guaranteed or conclude. No Yes. List all payments to an insider Insider's Name and Address 14: Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes. No	Dates of payment Dates, and Foreclosures Otcy, were you a party in a	paid nyments or transfer a Total amount paid nny lawsuit, court ac	still owe any property on a Amount you still owe	Reason for this payment Include creditor's name
	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or compared in the second of the second	Dates of payment Dates of pay	paid nyments or transfer a Total amount paid any lawsuit, court acons, divorces, collections.	Amount you still owe	Reason for this payment Include creditor's name rative proceeding? actions, support or custody
	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or color local No Yes. List all payments to an insider Insider's Name and Address 1 Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Within 1 year before you filed for bankrup Check all that apply and fill in the details belong the contract of the	Dates of payment Dates of pay	paid nyments or transfer a Total amount paid any lawsuit, court acons, divorces, collections.	Amount you still owe	Reason for this payment Include creditor's name rative proceeding? actions, support or custody
	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or color local No Yes. List all payments to an insider Insider's Name and Address 14: Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Within 1 year before you filed for bankrup Check all that apply and fill in the details belong the contract of t	Dates of payment Dates of pay	paid nyments or transfer a Total amount paid any lawsuit, court ac ons, divorces, collection Court or agency perty repossessed, f	Amount you still owe	Reason for this payment Include creditor's name rative proceeding? actions, support or custody

	otor 1 Andy L. Kirkpatrick otor 2 Alissa J. Kirkpatrick	Case number	r (if known)	
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be No Yes. Fill in the details.	ptcy, did any creditor, including a bank or financial in cause you owed a debt?	nstitution, set off any	amounts from your
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or ■ No □ Yes	tcy, was any of your property in the possession of an another official?	assignee for the bene	efit of creditors, a
Par	t 5: List Certain Gifts and Contributions			
13.	■ No □ Yes. Fill in the details for each gift.	ptcy, did you give any gifts with a total value of more		
	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and	Describe the gifts	Dates you gave the gifts	Value
	Address:			
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co	ptcy, did you give any gifts or contributions with a to	tal value of more than	\$600 to any charity
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankrup disaster, or gambling? No Yes. Fill in the details.	tcy or since you filed for bankruptcy, did you lose an	ything because of the	ft, fire, other
	how the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List bending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or pi	tcy, did you or anyone else acting on your behalf pay reparing a bankruptcy petition? reparers, or credit counseling agencies for services requires.		rty to anyone you
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Schoenbohm Law, S.C. 516 E. Wisconsin Avenue Appleton, WI 54911 cmh@schoenbohmlaw.com	Attorney Fees	12/11/15	\$515.00

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Debto Debto				ase number	(if known)	
Æ	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment
N In	Money Sharp, Inc. nternet vww.moneysharp.org	Pre-filing credit	t counseling		12/13/15	\$10.00
	Attorney Greg Holbus Green Bay	Free bankrupto	y consultation			\$0.00
pr	lithin 1 year before you filed for bankruptoromised to help you deal with your creditor on ot include any payment or transfer that you	ors or to make payment			or transfer any prope	erty to anyone who
	No Yes. Fill in the details.					
	Person Who Was Paid Address	Description and transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment
tr a In	Ithin 2 years before you filed for bankrup ansferred in the ordinary course of your be clude both outright transfers and transfers mediude gifts and transfers that you have alread No	ousiness or financial aff nade as security (such as	airs? the granting of a se			
Ξ	Yes. Fill in the details.					
Δ	Person Who Received Transfer Address	Description and property transfer			any property or received or debts schange	Date transfer was made
19. W	Person's relationship to you Iithin 10 years before you filed for bankruleneficiary? (These are often called asset-pr No Yes. Fill in the details.		ny property to a se	elf-settled tr	ust or similar device	of which you are a
N	lame of trust	Description and	value of the prope	erty transfer	red	Date Transfer was made
Part 8	List of Certain Financial Accounts, In	struments, Safe Depos	it Boxes, and Stor	age Units		
so In	lithin 1 year before you filed for bankruptoold, moved, or transferred? clude checking, savings, money market, ouses, pension funds, cooperatives, asso No Yes, Fill in the details.	or other financial accou	ınts; certificates o	of deposit; s		
4	Name of Financial Institution and Address (Number, Street, City, State and ZIP code)	Last 4 digits of account number	Type of account instrument	clo	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
2	North Shore Bank 2215 S. Oneida St. Green Bay, WI 54304	xxxx-8145	■ Checking □ Savings □ Money Marke □ Brokerage □ Other	12	2/10/15	\$8.00

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	otor 1 otor 2	Andy L. Kirkpatrick Alissa J. Kirkpatrick		Ca	se number (<i>if known</i>)	
21.	-	ou now have, or did you have within 1 yean, or other valuables?	r before you filed for bankruptcy, a	ny s	afe deposit box or other deposite	ory for securities,
		No				
		Yes. Fill in the details.				
		ne of Financial Institution Iress (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	De	scribe the contents	Do you still have it?
22.	Have	e you stored property in a storage unit or p	lace other than your home within 1	yea	ar before you filed for bankruptcy	
		No				
	□ N	Yes. Fill in the details.	Who also has so had access	D -		B
		ne of Storage Facility Iress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	De	scribe the contents	Do you still have it?
Par	t 9:	Identify Property You Hold or Control for	Someone Else			
23.		ou hold or control any property that some comeone. No Yes. Fill in the details.	one else owns? Include any proper	ty y	ou borrowed from, are storing fo	r, or hold in trust
	Ow	ner's Name Iress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value
Par	t 10:	Give Details About Environmental Inform	aation			
For	the p	urpose of Part 10, the following definitions	s apply:			
	toxic	ironmental law means any federal, state, or c substances, wastes, or material into the a llations controlling the cleanup of these su	air, land, soil, surface water, ground	_	•	
		means any location, facility, or property as wn, operate, or utilize it, including disposa	-	law,	whether you now own, operate,	or utilize it or used
		ardous material means anything an enviror ardous material, pollutant, contaminant, or		s wa	ste, hazardous substance, toxic	substance,
Rep	ort al	I notices, releases, and proceedings that y	ou know about, regardless of wher	n the	ey occurred.	
24.	Has	any governmental unit notified you that yo	u may be liable or potentially liable	une	der or in violation of an environm	ental law?
		No Yes. Fill in the details.				
		ne of site iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	ı	Environmental law, if you know it	Date of notice

No

Name of site

☐ Yes. Fill in the details.

Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

25. Have you notified any governmental unit of any release of hazardous material?

Date of notice

Environmental law, if you

know it

	otor 1 otor 2	Andy L. Kirkpatrick Alissa J. Kirkpatrick			Case number ((if known)				
26.	Have	you been a party in any judicial or ac	dministrative proc	ceeding under any env	ironmental law	? Include settleme	nts and orders.			
	_	No Yes. Fill in the details.								
		e Title e Number	Court or a Name Address (I State and ZIP	Number, Street, City,	Nature of the	case	Status of the case			
Pai	rt 11:	Give Details About Your Business o	r Connections to	Any Business						
27.	Withi	n 4 years before you filed for bankru	ptcy, did you own	a business or have a	ny of the follow	ing connections to	any business?			
		/ithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
		☐ A member of a limited liability con	npany (LLC) or lin	nited liability partners	nip (LLP)					
		☐ A partner in a partnership	,		,					
		□ An officer, director, or managing e	executive of a cor	poration						
		☐ An owner of at least 5% of the voting or equity securities of a corporation								
	_	No. None of the above applies. Go to Part 12.								
		Yes. Check all that apply above and f	elow for each husines	s						
				ribe the nature of the business						
	Add (Num	ress ber, Street, City, State and ZIP Code)	Name of accou	ıntant or bookkeeper	Do not in		rity number or ITIN.			
28.	instit	n 2 years before you filed for bankru utions, creditors, or other parties. No Yes. Fill in the details below.	ptcy, did you give	a financial statement	to anyone abou	ut your business? I	Include all financial			
	Nam	e	Date Issued							
		ber, Street, City, State and ZIP Code)								
Pai	rt 12:	Sign Below								
are vith	true a ı a bar	d the answers on this <i>Statement of F</i> nd correct. I understand that making hkruptcy case can result in fines up to §§ 152, 1341, 1519, and 3571.	a false statement	, concealing property	or obtaining m	oney or property b				
		L. Kirkpatrick		ssa J. Kirkpatrick						
		Kirkpatrick e of Debtor 1		a J. Kirkpatrick ture of Debtor 2						
		ebruary 1, 2016	Date	February 1, 2016						
Did ■ N □ Y	10	ttach additional pages to Your Staten	nent of Financial	Affairs for Individuals	Filing for Bank	ruptcy (Official For	m 107)?			
Did ■ N		ay or agree to pay someone who is n	ot an attorney to l	help you fill out bankr	uptcy forms?					
		ame of Person Attach the Bank	ruptcy Petition Pre	parer's Notice, Declara	tion, and Signatu	<i>Ire</i> (Official Form 11	9).			

Fill in this information to identify your case:						
Debtor 1	Andy L. Kirkpatrick					
Debtor 2 (Spouse, if filing) Alissa J. Kirkpatrick						
United States E	Sankruptcy Court for the:	Eastern District of Wisconsin				
Case number(if known)						

Check as directed in lines 17 and 21:					
	ording to the calculations required by this tement:				
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).				
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
	3. The commitment period is 3 years.				
	4. The commitment period is 5 years.				

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

the same remai property, put the income norm that property in	one column only. If you have i	lourning to report i	ioi ariy iirle, write s	ou in the	space.	
	Column A Debtor 1		Column B Debtor 2 or non-filing spouse			
Your gross wages, salary, tips, bonuses, overti all payroll deductions).	me, and commissions (b	pefore \$	4,425.36	\$	3,877.35	
 Alimony and maintenance payments. Do not inc Column B is filled in. 	lude payments from a spo	use if \$	0.00	\$	0.00	
4. All amounts from any source which are regular of you or your dependents, including child sup from an unmarried partner, members of your house and roommates. Include regular contributions from filled in. Do not include payments you listed on line	port. Include regular contre ehold, your dependents, p a a spouse only if Column	ributions arents,	0.00	\$	0.00	
5. Net income from operating a business, profession, or farm	Debtor 1					
Gross receipts (before all deductions)	\$ 0.00					
Ordinary and necessary operating expenses	-\$ 0.00					
Net monthly income from a business, profession, of	or farm \$ 0.00 Copy	/ here -> \$	0.00	\$	0.00	
6. Net income from rental and other real property	Debtor 1					
Gross receipts (before all deductions)	\$ 0.00					
Ordinary and necessary operating expenses	-\$ 0.00					
Net monthly income from rental or other real prope	erty \$ 0.00 Copy	y here -> \$	0.00	\$	0.00	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1 Debtor 2

Case number (if known)

			Column A Debtor 1		Column B Debtor 2	or	
7.	Interest, dividends, and royalties		\$	0.00	\$	0.00	
8.	Unemployment compensation		\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received was a benefunder the Social Security Act. Instead, list it here:	fit					
	For you\$\$	00_					
	For your spouse \$ 0.0	00					
9.	Pension or retirement income. Do not include any amount received that was benefit under the Social Security Act.	is a	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specify the source and ar Do not include any benefits received under the Social Security Act or paymer received as a victim of a war crime, a crime against humanity, or internationa domestic terrorism. If necessary, list other sources on a separate page and p total below.	nts I or					
			\$	0.00	\$	0.00	
			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.	+	\$	0.00	\$	0.00	
11.	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$	4,425.36	+ \$_	3,877.35	= \$	8,302.71
12. 13.	2: Determine How to Measure Your Deductions from Income Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one:					\$	8,302.71
	☐ You are not married. Fill in 0 below.						
	You are married and your spouse is filing with you. Fill in 0 below.						
	You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that was NO dependents, such as payment of the spouse's tax liability or the spouse's						
	Below, specify the basis for excluding this income and the amount of incadjustments on a separate page.	ome d	evoted to ead	ch purpos	e. If necessa	ry, list add	litional
	If this adjustment does not apply, enter 0 below.	\$					
		\$					
		+\$_					
	Total	\$_	0.0	00 C	opy here=>		0.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$	8,302.71
15.	Calculate your current monthly income for the year. Follow these steps:						
	15a. Copy line 14 here=>					\$	8,302.71
	Multiply line 15a by 12 (the number of months in a year).					X	12
	15b. The result is your current monthly income for the year for this part of t	he forn	n			\$	99,632.52

Debtor 1 Debtor 2 Andy L. Kirkpatrick Alissa J. Kirkpatrick

Case number (if known)

16	. Calculate	the median family income that applies to y	ou. Follow these steps:			
	16a. Fill in	the state in which you live.	WI			
	16b. Fill in	the number of people in your household.	3			
	16c. Fill in	the median family income for your state and s	size of household.		\$	69,410.00
		d a list of applicable median income amounts			Ψ_	
17		ctions for this form. This list may also be avail e lines compare?	able at the bankruptcy of	cierk's office.		
.,		Line 15b is less than or equal to line 16c. O	n the top of page 1 of th	is form, check box 1. Disposable inc	ome is not	determined under
		11 U.S.C. § 1325(b)(3). Go to Part 3. Do No	OT fill out Calculation of	Your Disposable Income (Official Fo	rm 122C-	2).
	17b. ■	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu copy your current monthly income from line	lation of Your Disposa	neck box 2, Disposable income is det ble Income (Official Form 122C-2).	ermined u On line 3	nder 11 U.S.C. § 9 of that form,
Par	t 3: Cald	culate Your Commitment Period Under 11 l	J.S.C. § 1325(b)(4)			
18.	Copy your	total average monthly income from line 11	l .		\$	8,302.71
19.	contend the spouse's in	e marital adjustment if it applies. If you are at calculating the commitment period under 10 ncome, copy the amount from line 13.	I U.S.C. § 1325(b)(4) all	not filing with you, and you ows you to deduct part of your		2.22
	19a. If the	marital adjustment does not apply, fill in 0 on	line 19a.		-\$	0.00
	19b. Subtr	act line 19a from line 18.			\$	8,302.71
20	Calculate	your ourrent menthly income for the year	Follow these steps:			
20.		your current monthly income for the year.	•		\$	8,302.71
		line 19b				
	Multip	by 12 (the number of months in a year).			X	12
	20b. The re	esult is your current monthly income for the ye	ear for this part of the for	rm	\$	99,632.52
		,	·			
	20c. Copy	the median family income for your state and s	size of household from li	ne 16c	\$_	69,410.00
	04	de the lines command				
		do the lines compare?				
		Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	e ordered by the court,	on the top of page 1 of this form, che	ck box 3,	The commitment
		Line 20b is more than or equal to line 20c. Unl	ess otherwise ordered b	by the court, on the top of page 1 of the	nis form, c	heck box 4, The
Par		n Below				
. u.	_	here, under penalty of perjury I declare that the	ne information on this sta	atement and in any attachments is tru	ue and coi	rect.
,	(/s/ Andv	L. Kirkpatrick	Y Isl	Alissa J. Kirkpatrick		
•	Andy L.	Kirkpatrick	Alis	ssa J. Kirkpatrick		
	•	of Debtor 1	•	nature of Debtor 2		
		ruary 1, 2016 / DD / YYYY	Date	February 1, 2016 MM / DD / YYYY		
		ked 17a, do NOT fill out or file Form 122C-2.				
	If you chec	ked 17b, fill out Form 122C-2 and file it with the	nis form. On line 39 of th	nat form, copy your current monthly in	ncome from	n line 14 above.

Fill in this inf	formation to identify your case:	
Debtor 1	Andy L. Kirkpatrick	
Debtor 2	Alissa J. Kirkpatrick	
(Spouse, if fili	ng)	
United States	Bankruptcy Court for the: Eastern District of Wisconsin	
Case number		
(if known)		☐ Check if this is an amended filing
Official Form Chapter	122C-2 13 Calculation of Your Disposable Inc	come

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1.249.00

12/15

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older-because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Official Form 22C-2

Peop	e who are under 65 years of age				
7	a. Out-of-pocket health care allowance per person	\$ 60			
7	b. Number of people who are under 65	х з	_		
7	c. Subtotal. Multiply line 7a by line 7b.	\$ 180.00	Copy here=>	\$180.00	
Peop	e who are 65 years of age or older				
7	d. Out-of-pocket health care allowance per person	\$ 144			
7	e. Number of people who are 65 or older	x 0	_		
7	f. Subtotal. Multiply line 7d by line 7e.	\$ 0.00	Copy here=>	\$	
7	g. Total. Add line 7c and line 7f		\$180.00	Copy total here=>	\$ <u>180.00</u>
	Other deads. New good was the IDO Least Other lands to		lana la llana 0.45		
	Standards You must use the IRS Local Standards to I on information from the IRS, the U.S. Trustee Programmer	•		l for housing for	
	uptcy purposes into two parts:	gram nas divided	the INS Local Standard	To flousing for	
■ Ho	using and utilities - Insurance and operating expen	ses			
	using and utilities - Mortgage or rent expenses				
separ	swer the questions in lines 8-9, use the U.S. Trusted ate instructions for this form. This chart may also b	e available at the	bankruptcy clerk's offic	ce.	specified in the
	lousing and utilities - Insurance and operating expe Il in the dollar amount listed for your county for insurance			ered in line 5, \$	531.00
	lousing and utilities - Mortgage or rent expenses:	, , , , , , , , , , , , , , , , , , ,	,	_	
9	a. Using the number of people you entered in line 5, fi listed for your county for mortgage or rent expense:		unt	\$1,187.00	
ç	b. Total average monthly payment for all mortgages a	and other debts sed	cured by your home.		
	To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.				
	Name of the creditor	Average mo payment	nthly		
	Fox Communities Credit Union	\$\$	653.00		
	9b. Total average monthly paymen	s	Copy here=> -\$	• 652 NN	Repeat this amount on line 33a.
9	c. Net mortgage or rent expense.				
	Subtract line 9b (total average monthly payment) fror rent expense). If this number is less than \$0, ent		s	534.00 Copy here=>	\$534.00
	f you claim that the U.S. Trustee Program's division on the calculation of your monthly expenses, fill in any addi			correct and affects	\$
	Explain why:				

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Debtor 1	Andy L. Kirkpatrick
Debtor 2	Alissa J. Kirkpatrick

Case number (if known)

11.	Local tra	ansportation expense	s: Check the number of vehicles for which you claim ar	owne	rship or operating exper	ise.	
	□ 0. Go	to line 14.					
	☐ 1. Go	to line 12.					
	■ 2 or r	more. Go to line 12.					
12.			Ising the IRS Local Standards and the number of vehicle Operating Costs that apply for your Census region or me			\$	624.00
13.	You may		xpense: Using the IRS Local Standards, calculate the refiyou do not make any loan or lease payments on the				
V	ehicle 1	Describe Vehicle 1:	2005 Chevrolet Tahoe Location: 1261 Marian WI 54304	Lane	, Green Bay		
138	a. Ownersh	nip or leasing costs usi	ng IRS Local Standard	\$_	517.00		
13b	o. Average	monthly payment for a	Ill debts secured by Vehicle 1.				
	Do not in						
	DO HOU II	nclude costs for leased	vehicles.				

Name of each creditor for Vehicle 1	Average monthly payment	
Community First Credit Union	\$ 201.40	
Total Average Monthly Payment	\$ 201.40 Copy here => -\$	Repeat this amount on line 33b.
13c. Net Vehicle 1 ownership or lease expense		Copy net
Subtract line 13b from line 13a. if this number is less than \$0		Vehicle 1 expense here 315.60 315.60
	\$	=> \$ <u>315.60</u>
Vehicle 2 Describe Vehicle 2: 2012 Chevrolet Impala Bay WI 54304	ocation: 1261 Marian Lane, Gr	een
13d. Ownership or leasing costs using IRS Local Standard	\$	517.00
13e. Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	Oo not include costs for	
Name of each creditor for Vehicle 2	Average monthly payment	
Community First Credit Union	193.38	
Total Average Monthly Payment	\$Copy here => -\$	Repeat this amount on line 33c.
13f. Net Vehicle 2 ownership or lease expense		Copy net
Subtract line 13e from line 13d. if this number is less than \$0	enter \$0\$	323.62 Vehicle 2 expense here
14. Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of v		
15. Additional public transportation expense: If you claimed 1 also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Trans</i> .	at you believe is the appropriate exp	

Page 66 of 77

Oth	er Neces	ssary Expenses	In addition to the expens the following IRS catego		ons listed above	, you are allowed your monthly expense	s for	
16.	5. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.						\$	861.77
17.	Involur	ntary deductions:	he total monthly payroll c	deductions	that your job re	equires, such as retirement		
	contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.						\$	0.00
18			. , , ,	•	•	.,	Ψ_	
10.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.						\$	36.90
19.	 Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 						\$	0.00
20		. ,	hly amount that you pay f	•	• • • • • • • • • • • • • • • • • • • •	· ·	· —	
20.		condition for your jo		or caucati	on that is citror	required.		
	for y	our physically or me	entally challenged depend	lent child i	f no public educ	cation is available for similar services.	\$	0.00
21.			nly amount that you pay fo	or childcar	e, such as baby	sitting, daycare, nursery, and		
	prescho Do not		or any elementary or seco	ndary sch	ool education.		\$	340.00
22.						amount that you pay for health care		
			th and welfare of you or y it. Include only the amoun			s not reimbursed by insurance or paid al entered in line 7.		
	•	•	nce or health savings acc				\$	0.00
23.	3. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment							0.00
	expens	es, such as mose re	sported on line 3 of Officia	11 01111 12	20-1, or any an	nount you previously deducted.	+\$_	
24.		of the expenses a es 6 through 23.	llowed under the IRS ex	pense all	owances.		\$	4,995.89
Add	litional E	Expense Deduction			,	he Means Test. s listed in lines 6-24.		
25.	insuran					nses. The monthly expenses for health oly necessary for yourself, your spouse,	or	
	Health i	insurance		\$	300.64			
	Disabili	ty insurance		\$	70.68			
	Health	savings account		+\$	83.18			
	Total			\$_	454.50	Copy total here=>	\$	454.50
		actually spend this No. How much do y				_		
		Yes		\$				
26.	16. Continued contributions to the care of household or family members. The actual monthly expenses that you wi continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b)						\$	0.00
27.						enses that you incur to maintain the ces Act or other federal laws that apply.		
	By law, the court must keep the nature of these expenses confidential.						\$	0.00

33e Total average monthly payment. Add lines 33a through 33d

1,061.11

Copy

here=>

1.061.11

\$

		e 33 secured by your prima ur support or the support o			le,					
■ No.	Go to line 35.									
☐ Yes.		must pay to a creditor, in adossession of your property (can the information below.								
Name of the	creditor	Identify property that secure	s the c	lebt	To	otal cure amount			onthly nount	cure
-NONE-				\$	-		÷ 60 =			
				Total	\$	0.00	to	opy tal ere=>	\$_	0.00
		uch as a priority tax, child attention at a priority tax, child attention at the contract of t								
■ No.	Go to line 36.									
☐ Yes.		Ill of these priority claims. Do		nclude current or						
	Total amount of all past-o	lue priority claims			\$	0.00	÷	60	\$	0.00
36. Projecte	d monthly Chapter 13 plar	n payment			\$	1,302.00				
Office of the Exec To find a li	the United States Courts (for utive Office for United State ist of district multipliers that inclu	stated on the list issued by the or districts in Alabama and Nors Trustees (for all other districts go online using may also be available at the ban	orth Cicts). the link	arolina) or by specified in the	X	4.20				
·	monthly administrative expe	•	, ,			\$54.68		/ tota =>		54.68
	of the deductions for deb es 33e through 36.	t payment.							\$	1,115.79
Total Deduc	tions from Income									
38. Add all d	of the allowed deductions.									
Copy lir expens	ne 24, All of the expenses are allowances	llowed under IRS	\$_	4,995.8	9					
	ne 32, All of the additional ex		\$	479.5	0					
Copy lir	ne 37, All of the deductions	for debt payment	+\$_	1,115.7	9_	_				
Total de	eductions		\$_	6,591.1	8	Copy total here=>		;	\$	6,591.18

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Andy L. Kirkpatrick Alissa J. Kirkpatrick Debtor 1 Debtor 2

Case number (if known)

								` '								
39.				thly income <i>lonthly Inc</i> o						l		\$	i		8,302	.71
	children disability received	n. The montly payments t	hly averag for a depe nce with ap	sary income e of any child ndent child, r oplicable non such child.	I support pay eported in Pa	ments, for	ster ca m 122	are payme 2C-1, that	ents, or you	\$		0.00	_			
	employe in 11 U.	er withheld fr	om wages)(7) plus a	t deductions as contribut Il required re (19).	ions for quali	ified retirer	nent p	olans, as s	specifie	d \$	į	896.88	_			
42.	Total of	all deduction	ons allow	ed under 11	U.S.C. § 70	7(b)(2)(A).	Сору	line 38 he	ere =	:> \$	6,	591.18				
	expense their exp	es and you h penses. You	ave no rea must give	nstances. If sasonable alte your case tration for the e	rnative, desc ustee a deta	ribe the sp	pecial	circumsta	inces a	nd			_			
Des	scribe th	ne special c	ircumstar	ices				Amount	of exp	ense						
							\$;								
							* \$									
							\$	·								
						Total			0.00	Cop			0.00			
						iotai	\$_				е=> Ф					
44.	Total ad	djustments.	Add lines	40 through 4	3	Total			=>	\$	7,488.0	6 Co			7,488	.06
				40 through 4				tract line 4		\$	7,488.0	_	ру		7,488 814.6	
	Calcula		nthly disp	osable inco				tract line 4		\$	7,488.0	_	ppy re=> - \$			
45. Part 3 46.	Change have chime you you filed	hange in Ince in income anged or are ur case will be d your petitio	or expense virtually on open, fill on, check 1	osable inco	me under § come in Forminge after the nation below first column,	1325(b)(2) 1 122C-1 of edate you and a few examples of the control of the contro	or the efiled y	expenses rour bankr the wage	you repuptcy ps report	\$ line 3	7,488.0 9. in this form and during creased after	the er	ppy re=> - \$			
45. Part 3 46.	Calcula Change have ch time you you filed wages in	hange in Ince in income anged or are ur case will be d your petitio	or expense or evirtually one open, fill n, check 1 in when t	ess. If the incorrection to charle in the informal 22C-1 in the	me under § come in Forminge after the nation below first column,	1325(b)(2) 1 122C-1 of edate you and a few examples of the control of the contro	or the efiled y	expenses our bankr the wage ne second nt of the in	you repuptcy ps report	\$ line 30 ported petition ted ind n, exp	7,488.0 9. in this form and during creased after	the	ppy re=> - \$	f change	814.6	
45. 46.	Calcula Change have ch time you filed wages in m 122C-1 122C-2 122C-1	hange in Inc e in income langed or are ur case will be d your petitio ncreased, fill	or expense or every first or expense or every first	xpenses ses. If the incore to characteristic to characteristic in the inform 22C-1 in the the increase of	me under § come in Forminge after the nation below first column, occurred, and	1325(b)(2) 1 122C-1 of edate you and a few examples of the control of the contro	or the efiled y	expenses our bankr the wage ne second nt of the in	you repuptcy ps report columncrease	\$ line 30 ported petition ted ind n, exp	7,488.0 9. in this form and during creased after lain why the lain w	the er	spy re=> -\$ \$	f change 270.0	814.6	
45. Part 3 46.	Calcula Change have ch time you you filed wages in m 122C-1 122C-2	hange in Ince e in income langed or are ur case will be d your petitio ncreased, fill	or expense or every first or expense or every first	ess. If the incorporation to characteristic to characteristic in the information 22C-1 in the the increase of the change	me under § come in Forminge after the nation below first column, occurred, and	1325(b)(2) 1 122C-1 of edate you and a few examples of the control of the contro	or the efiled y	expenses our bankr the wage ne second nt of the in	you repuptcy ps report columncrease	\$ line 30	7,488.0 9. in this form and during creased after lain why the lain w	the err	spy re=> -\$ \$		814.6	

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Debtor 2	Alissa J. Kirkpatrick	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you decla	are that the information on this statement and in any attachments is true and correct.
-	/s/ Andy L. Kirkpatrick Andy L. Kirkpatrick Signature of Debtor 1	X /s/ Alissa J. Kirkpatrick Alissa J. Kirkpatrick Signature of Debtor 2
_	February 1, 2016	Date February 1, 2016 MM / DD / YYYY

Andy L. Kirkpatrick

Debtor 1

Debtor 1 Debtor 2 Andy L. Kirkpatrick Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2015 to 01/31/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Wages

Income by Month:

6 Months Ago:	08/2015	\$4,084.94
5 Months Ago:	09/2015	\$4,084.94
4 Months Ago:	10/2015	\$6,127.42
3 Months Ago:	11/2015	\$4,084.95
2 Months Ago:	12/2015	\$4,084.94
Last Month:	01/2016	\$4,084.94
	Average per month:	\$4,425.36

Debtor 1
Debtor 2
Andy L. Kirkpatrick
Alissa J. Kirkpatrick
Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **08/01/2015** to **01/31/2016**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Wages/Commissions

Income by Month:

6 Months Ago:	08/2015	\$3,677.18
5 Months Ago:	09/2015	\$4,177.57
4 Months Ago:	10/2015	\$3,757.88
3 Months Ago:	11/2015	\$4,034.01
2 Months Ago:	12/2015	\$3,885.13
Last Month:	01/2016	\$3,732.34
	Average per month:	\$3,877.35

United States Bankruptcy Court Eastern District of Wisconsin

In	Andy L. Kirkpatrick re Alissa J. Kirkpatrick		Case No.						
		Debtor(s)	Chapter	13					
	DISCLOSURE OF COMPE			. ,					
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filit be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy.	or agreed to be pai	d to me, for services rendered or to					
				3,500.00					
	Prior to the filing of this statement I have received		\$	515.00					
	Balance Due		\$	2,985.00					
2.	The source of the compensation paid to me was:								
	■ Debtor □ Other (specify):								
3.	The source of compensation to be paid to me is:								
	■ Debtor □ Other (specify):								
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are mer	nbers and associates of my law firm.					
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na								
5.	In return for the above-disclosed fee, I have agreed to re	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to 	tement of affairs and plan which ors and confirmation hearing, a reduce to market value; ex	n may be required; and any adjourned he emption planning	arings thereof;					
	reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho		and ming of mo	tions pursuant to 11 050					
6.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis- any other adversary proceeding.	e does not include the following schargeability actions, judi	g service: cial lien avoidan	ces, relief from stay actions or					
		CERTIFICATION							
this	I certify that the foregoing is a complete statement of an bankruptcy proceeding.	y agreement or arrangement for	payment to me for	representation of the debtor(s) in					
	February 1, 2016	/s/ Michael P. Sc	hoenbohm						
	Date	Michael P. Schoe							
		Signature of Attorne Schoenbohm Lav							
		516 E. Wisconsir							
		Appleton, WI 549							
		920-735-5858 Fa							
		cmh@schoenbol Name of law firm	iiiiaw.com						
<u></u>		Trance of tan film							

Best Buy Credit Services Citibank P.O. Box 6500 Sioux Falls, SD 57117

Cabela's Club Visa P.O. Box 82608 Lincoln, NE 68501-2608

Capital One PO Box 30285 Salt Lake City, UT 84130-0285

Capital One-Menards PO Box 30285 Salt Lake City, UT 84130-0285

Citibank P.O. Box 6500 Sioux Falls, SD 57117

Comenity Bank New York & Co. Bankruptcy Department P.O. Box 182125 Columbus, OH 43218-2125

Comenity Bank-Gander Mountain Bankruptcy Department P.O. Box 182125 Columbus, OH 43218-2125

Comenity Bank-Victoria's Secret Bankruptcy Department P.O. Box 182125 Columbus, OH 43218-2125

Comenity Bank-Younkers Bankruptcy Department P.O. Box 182125 Columbus, OH 43218-2125

Community First Credit Union PO Box 1487 Appleton, WI 54912-1487

Discover
DB Servicing Corporation
P.O. Box 3025
New Albany, OH 43054-3025

Elan Cardmember Services PO Box 790084 Saint Louis, MO 63179-0084 Fox Communities Credit Union 3401 E. Calumet Street Appleton, WI 54915

Furniture Row
Capital One
P.O. Box 30295
Salt Lake City, UT 84130-0285

HSHS Division Eastern WI 25870 Network Place Chicago, IL 60673-1258

Internal Revenue Service Centralized Insolvency P.O. Box 7346 Philadelphia, PA 19101-7346

Kohls Attn: Recovery PO Box 3043 Milwaukee, WI 53201-3043

Prevea Health PO Box 19041 Green Bay, WI 54307

Sears Credit Cards PO Box 6282 Sioux Falls, SD 57117-6282

Synchrony Bank - Care Credit Attn: Bankruptcy Department P.O. Box 965060 Orlando, FL 32896-5060

Synchrony Bank - Gap P.O. Box 103104 Roswell, GA 30076

Synchrony Bank - JC Penny PO Box 103104 Roswell, GA 30076

WI Dept. of Revenue Special Procedures Union P.O. Box 8901 Madison, WI 53708-8091

United States Bankruptcy Court Eastern District of Wisconsin

In re	Andy L. Kirkpatrick Alissa J. Kirkpatrick		Case No.	
	,	Debtor(s)	Chapter	13
The abo	VERIFICATION OF THE PROPERTY O	CATION OF CREDITOR ne attached list of creditors is true and		of their knowledge.
Date:	February 1, 2016	/s/ Andy L. Kirkpatrick Andy L. Kirkpatrick		
		Signature of Debtor		
Date:	February 1, 2016	/s/ Alissa J. Kirkpatrick Alissa J. Kirkpatrick		

Signature of Debtor